

EXHIBIT B

COPY

Original Filed

AUG 18 2021

TIMOTHY W. FITZGERALD
SPOKANE COUNTY CLERK

IN THE SUPERIOR COURT FOR THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF SPOKANE

21202311-32

RICHARD MAYER, a single person,

Case No.

Plaintiff,

SUMMONS (20 days)

vs.

STATE OF WASHINGTON,
WASHINGTON STATE
DEPARTMENT OF CORRECTIONS,
AIRWAY HEIGHTS CORRECTIONS
CENTER, CITY OF AIRWAY
HEIGHTS, ALBERT TRIPP City
Manager of CITY OF AIRWAY
HEIGHTS, CORRECTION OFFICER
JARED BEERBAHN,
SUPERINTENDENT JAMES R. KEY,
SANDRA A. (THOMPSON) CONNER
Advanced Registered Nurse Practitioner
of AIRWAY HEIGHTS
CORRECTIONS CENTER, DEBORAH
TONHOFFER MD, STEVEN
HAMMOND Chief Medical Officer for
WASHINGTON STATE DEPARTMENT
OF CORRECTIONS, RUSTY SMITH
Head of Medical for AIRWAY
HEIGHTS CORRECTIONS CENTER,
JOHN/JANE DOE 1 Employee of CITY
OF AIRWAY HEIGHTS, and
JOHN/JANE DOES 2-10,

Defendants.

SUMMONS

1

PHELPS & ASSOCIATES, P.S.

2903 N. Stout Road

Spokane, WA 99206

Tel: (509) 892-0467

Fax: (509) 921-0802

phelps@phelps1.com

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TO: STATE OF WASHINGTON

A lawsuit has been started against you in the above-entitled Court by, Plaintiff Richard Mayer. Plaintiff's claim is stated in the written complaint, a copy of which is served upon you with this Summons.

In order to defend against this lawsuit, you must respond to the complaint by stating your defense in writing, and serve a copy upon the person signing this summons within twenty (20) days after the service of this Summons, excluding the day of service, or within sixty (60) days if this Summons was served outside the State of Washington, or within forty (40) days if this Summons is served through the Insurance Commissioner's Office, or a Default Judgment may be entered against you without notice. A Default Judgment is one where Plaintiff is entitled to what the complaint asks for because you have not responded. If you serve a notice of appearance on the undersigned attorney, you are entitled to notice before a default judgment may be entered.

You may demand that the Plaintiff file this lawsuit with the Court. If you do so, the demand must be made in writing and must be served upon the Plaintiffs. Within fourteen (14) days after you serve demand, the Plaintiffs must file this lawsuit with the Court, or the service on you of this Summons and Complaint will be void.


If you wish to seek the advice of an attorney in this matter, you should do so promptly so that your written response, if any, may be served on time.

This Summons is issued pursuant to Rule 4 of the Superior Court Civil Rules of the State of Washington.

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DATED at Spokane, Washington this 17 day of August, 2021.

PHELPS AND ASSOCIATES, P.S.
Attorneys for Plaintiff



DOUGLAS D. PHELPS, WSBA #22620
2903 N. Stout Road
Spokane, WA 99206
(509) 892-0467
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IN THE SUPERIOR COURT FOR THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF SPOKANE

21202311-32

RICHARD MAYER, a single person,
Plaintiff,
vs.

Case No. _____

SUMMONS (20 days)

STATE OF WASHINGTON,
WASHINGTON STATE
DEPARTMENT OF CORRECTIONS,
AIRWAY HEIGHTS CORRECTIONS
CENTER, CITY OF AIRWAY
HEIGHTS, ALBERT TRIPP City
Manager of CITY OF AIRWAY
HEIGHTS, CORRECTION OFFICER
JARED BEERBAHN,
SUPERINTENDENT JAMES R. KEY,
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Advanced Registered Nurse Practitioner
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CORRECTIONS CENTER, DEBORAH
TONHOFFER MD, STEVEN
HAMMOND Chief Medical Officer for
WASHINGTON STATE DEPARTMENT
OF CORRECTIONS, RUSTY SMITH
Head of Medical for AIRWAY
HEIGHTS CORRECTIONS CENTER,
JOHN/JANE DOE 1 Employee of CITY
OF AIRWAY HEIGHTS, and
JOHN/JANE DOES 2-10,
Defendants.

SUMMONS

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2903 N. Stout Road
Spokane, WA 99206
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Fax: (509) 921-0802
phelps@phelpsaw1.com

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TO: WASHINGTON STATE DEPARTMENT OF
CORRECTIONS

A lawsuit has been started against you in the above-entitled Court by, Plaintiff Richard Mayer. Plaintiff's claim is stated in the written complaint, a copy of which is served upon you with this Summons.

In order to defend against this lawsuit, you must respond to the complaint by stating your defense in writing, and serve a copy upon the person signing this summons within twenty (20) days after the service of this Summons, excluding the day of service, or within sixty (60) days if this Summons was served outside the State of Washington, or within forty (40) days if this Summons is served through the Insurance Commissioner's Office, or a Default Judgment may be entered against you without notice. A Default Judgment is one where Plaintiff is entitled to what the complaint asks for because you have not responded. If you serve a notice of appearance on the undersigned attorney, you are entitled to notice before a default judgment may be entered.

You may demand that the Plaintiff file this lawsuit with the Court. If you do so, the demand must be made in writing and must be served upon the Plaintiffs. Within fourteen (14) days after you serve demand, the Plaintiffs must file this lawsuit with the Court, or the service on you of this Summons and Complaint will be void.


If you wish to seek the advice of an attorney in this matter, you should do so promptly so that your written response, if any, may be served on time.

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DATED at Spokane, Washington this 17th day of August, 2021.

PHELPS AND ASSOCIATES, P.S.
Attorneys for Plaintiff



DOUGLAS D. PHELPS, WSBA #22620
2903 N. Stout Road
Spokane, WA 99206
(509) 892-0467
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TIMOTHY W. FITZGERALD
SPOKANE COUNTY CLERK

**IN THE SUPERIOR COURT FOR THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF SPOKANE**

RICHARD MAYER, a single person,

Plaintiff,

vs.

STATE OF WASHINGTON,
WASHINGTON STATE
DEPARTMENT OF CORRECTIONS,
AIRWAY HEIGHTS CORRECTIONS
CENTER, CITY OF AIRWAY
HEIGHTS, ALBERT TRIPP City
Manager of CITY OF AIRWAY
HEIGHTS, CORRECTION OFFICER
JARED BEERBAHN,
SUPERINTENDENT JAMES R. KEY,
SANDRA A. (THOMPSON) CONNER
Advanced Registered Nurse Practitioner
of AIRWAY HEIGHTS
CORRECTIONS CENTER, DEBORAH
TONHOFFER MD, STEVEN
HAMMOND Chief Medical Officer for
WASHINGTON STATE DEPARTMENT
OF CORRECTIONS, RUSTY SMITH
Head of Medical for AIRWAY
HEIGHTS CORRECTIONS CENTER,
JOHN/JANE DOE 1 Employee of CITY
OF AIRWAY HEIGHTS, and
JOHN/JANE DOES 2-10,

Defendants.

Case No.

21202311-32

SUMMONS (20 days)

SUMMONS

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PHELPS & ASSOCIATES, P.S.

2903 N. Stout Road

Spokane, WA 99206

Tel: (509) 892-0467

Fax: (509) 921-0802

phelps@phelpsaw1.com

1
2
3 TO: AIRWAY HEIGHTS CORRECTIONS CENTER

4 A lawsuit has been started against you in the above-entitled Court by, Plaintiff Richard
5 Mayer. Plaintiff's claim is stated in the written complaint, a copy of which is served upon you
6 with this Summons.

7 In order to defend against this lawsuit, you must respond to the complaint by stating
8 your defense in writing, and serve a copy upon the person signing this summons within twenty
9 (20) days after the service of this Summons, excluding the day of service, or within sixty (60)
10 days if this Summons was served outside the State of Washington, or within forty (40) days if
11 this Summons is served through the Insurance Commissioner's Office, or a Default Judgment
12 may be entered against you without notice. A Default Judgment is one where Plaintiff is
13 entitled to what the complaint asks for because you have not responded. If you serve a notice
14 of appearance on the undersigned attorney, you are entitled to notice before a default judgment
15 may be entered.

16 You may demand that the Plaintiff file this lawsuit with the Court. If you do so, the
17 demand must be made in writing and must be served upon the Plaintiffs. Within fourteen (14)
18 days after you serve demand, the Plaintiffs must file this lawsuit with the Court, or the service
19 on you of this Summons and Complaint will be void.

20 If you wish to seek the advice of an attorney in this matter, you should do so promptly
21 so that your written response, if any, may be served on time.

22 This Summons is issued pursuant to Rule 4 of the Superior Court Civil Rules of the
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DATED at Spokane, Washington this 17th day of August, 2021.

PHELPS AND ASSOCIATES, P.S.
Attorneys for Plaintiff



DOUGLAS D. PHELPS, WSBA #22620
2903 N. Stout Road
Spokane, WA 99206
(509) 892-0467
phelps@phelpslaw1.com

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TIMOTHY W. FITZGERALD
SPOKANE COUNTY CLERK

IN THE SUPERIOR COURT FOR THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF SPOKANE

RICHARD MAYER, a single person,

Plaintiff,

vs.

STATE OF WASHINGTON,
WASHINGTON STATE
DEPARTMENT OF CORRECTIONS,
AIRWAY HEIGHTS CORRECTIONS
CENTER, CITY OF AIRWAY
HEIGHTS, ALBERT TRIPP City
Manager of CITY OF AIRWAY
HEIGHTS, CORRECTION OFFICER
JARED BEERBAHN,
SUPERINTENDENT JAMES R. KEY,
SANDRA A. (THOMPSON) CONNER
Advanced Registered Nurse Practitioner
of AIRWAY HEIGHTS
CORRECTIONS CENTER, DEBORAH
TONHOFFER MD, STEVEN
HAMMOND Chief Medical Officer for
WASHINGTON STATE DEPARTMENT
OF CORRECTIONS, RUSTY SMITH
Head of Medical for AIRWAY
HEIGHTS CORRECTIONS CENTER,
JOHN/JANE DOE 1 Employee of CITY
OF AIRWAY HEIGHTS, and
JOHN/JANE DOES 2-10,

Defendants.

Case No.

21202311-32

SUMMONS (20 days)

SUMMONS

1

PHELPS & ASSOCIATES, P.S.

2903 N. Stout Road

Spokane, WA 99206

Tel: (509) 892-0467

Fax: (509) 921-0802

phelps@phelpsaw1.com

COPY

1
2 TO: CORRECTIONS OFFICER JARED BEERBAHN

3 A lawsuit has been started against you in the above-entitled Court by, Plaintiff Richard
4 Mayer. Plaintiff's claim is stated in the written complaint, a copy of which is served upon you
5 with this Summons.

6 In order to defend against this lawsuit, you must respond to the complaint by stating
7 your defense in writing, and serve a copy upon the person signing this summons within twenty
8 (20) days after the service of this Summons, excluding the day of service, or within sixty (60)
9 days if this Summons was served outside the State of Washington, or within forty (40) days if
10 this Summons is served through the Insurance Commissioner's Office, or a Default Judgment
11 may be entered against you without notice. A Default Judgment is one where Plaintiff is
12 entitled to what the complaint asks for because you have not responded. If you serve a notice
13 of appearance on the undersigned attorney, you are entitled to notice before a default judgment
14 may be entered.

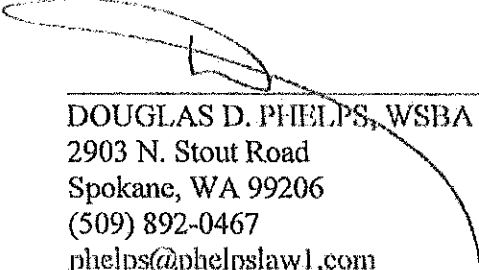
15 You may demand that the Plaintiff file this lawsuit with the Court. If you do so, the
16 demand must be made in writing and must be served upon the Plaintiffs. Within fourteen (14)
17 days after you serve demand, the Plaintiffs must file this lawsuit with the Court, or the service
18 on you of this Summons and Complaint will be void.

19 If you wish to seek the advice of an attorney in this matter, you should do so promptly
20 so that your written response, if any, may be served on time.

21 This Summons is issued pursuant to Rule 4 of the Superior Court Civil Rules of the
22 State of Washington.

1 DATED at Spokane, Washington this 17 day of August, 2021.

2 PHELPS AND ASSOCIATES, P.S.
3 Attorneys for Plaintiff

4 
5 _____
6 DOUGLAS D. PHELPS, WSBA #22620
7 2903 N. Stout Road
8 Spokane, WA 99206
9 (509) 892-0467
10 phelps@phelpslaw1.com

FILED

AUG 19 2021

TIMOTHY W. FITZGERALD
SPOKANE COUNTY CLERK

CN: 2120231132

SN: 3

PC: 3

**IN THE SUPERIOR COURT FOR THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF SPOKANE**

RICHARD MAYER, a single person,

Case No. 21202311-32

Plaintiff,

SUMMONS (20 days)

vs.

STATE OF WASHINGTON,
WASHINGTON STATE
DEPARTMENT OF CORRECTIONS,
AIRWAY HEIGHTS CORRECTIONS
CENTER, CITY OF AIRWAY
HEIGHTS, ALBERT TRIPP City
Manager of CITY OF AIRWAY
HEIGHTS, CORRECTION OFFICER
JARED BEERBAHN,
SUPERINTENDENT JAMES R. KEY,
SANDRA A. (THOMPSON) CONNER
Advanced Registered Nurse Practitioner
of AIRWAY HEIGHTS
CORRECTIONS CENTER, DEBORAH
TONHOFFER MD, STEVEN
HAMMOND Chief Medical Officer for
WASHINGTON STATE DEPARTMENT
OF CORRECTIONS, RUSTY SMITH
Head of Medical for AIRWAY
HEIGHTS CORRECTIONS CENTER,
JOHN/JANE DOE 1 Employee of CITY
OF AIRWAY HEIGHTS, and
JOHN/JANE DOES 2-10,

Defendants.

SUMMONS

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PHELPS & ASSOCIATES, P.S.

2903 N. Stout Road

Spokane, WA 99206

Tel: (509) 892-0467

Fax: (509) 921-0802

phelps@phelpsllaw1.com

ORIGINAL

1
2 TO: JOHN/JANE DOE 1, Employee of City of Airway
Heights

3 A lawsuit has been started against you in the above-entitled Court by, Plaintiff Richard
4 Mayer. Plaintiff's claim is stated in the written complaint, a copy of which is served upon you
with this Summons.

5 In order to defend against this lawsuit, you must respond to the complaint by stating
6 your defense in writing, and serve a copy upon the person signing this summons within twenty
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12 You may demand that the Plaintiff file this lawsuit with the Court. If you do so, the
13 demand must be made in writing and must be served upon the Plaintiffs. Within fourteen (14)
14 days after you serve demand, the Plaintiffs must file this lawsuit with the Court, or the service
on you of this Summons and Complaint will be void.


15 If you wish to seek the advice of an attorney in this matter, you should do so promptly
16 so that your written response, if any, may be served on time.

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DATED at Spokane, Washington this 18 day of August, 2021.

PHELPS AND ASSOCIATES, P.S.
Attorneys for Plaintiff



DOUGLAS D. PHELPS, WSBA #22620
2903 N. Stout Road
Spokane, WA 99206
(509) 892-0467
phelps@phelpslaw1.com

FILED

CN: 2120231132

AUG 19 2021

SN: 4

PC: 3

TIMOTHY W. FITZGERALD
SPOKANE COUNTY CLERK

**IN THE SUPERIOR COURT FOR THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF SPOKANE**

RICHARD MAYER, a single person,

Case No. 21202311-32

Plaintiff,

SUMMONS (20 days)

vs.

STATE OF WASHINGTON,
WASHINGTON STATE
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AIRWAY HEIGHTS CORRECTIONS
CENTER, CITY OF AIRWAY
HEIGHTS, ALBERT TRIPP City
Manager of CITY OF AIRWAY
HEIGHTS, CORRECTION OFFICER
JARED BEERBAHN,
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CORRECTIONS CENTER, DEBORAH
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OF CORRECTIONS, RUSTY SMITH
Head of Medical for AIRWAY
HEIGHTS CORRECTIONS CENTER,
JOHN/JANE DOE 1 Employee of CITY
OF AIRWAY HEIGHTS, and
JOHN/JANE DOES 2-10,

Defendants.

SUMMONS

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PHELPS & ASSOCIATES, P.S.

2903 N. Stout Road
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Tel: (509) 892-0467

Fax: (509) 921-0802

pHELPS@pHELPSlaw1.com

ORIGINAL

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TO: CITY OF AIRWAY HEIGHTS

A lawsuit has been started against you in the above-entitled Court by, Plaintiff Richard Mayer. Plaintiff's claim is stated in the written complaint, a copy of which is served upon you with this Summons.

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DATED at Spokane, Washington this 18 day of August, 2021.

PHELPS AND ASSOCIATES, P.S.
Attorneys for Plaintiff



DOUGLAS D. PHELPS, WSBA #22620
2903 N. Stout Road
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**IN THE SUPERIOR COURT FOR THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF SPOKANE**

RICHARD MAYER, a single person,
Plaintiff,

vs.

STATE OF WASHINGTON, WASHINGTON
STATE DEPARTMENT OF CORRECTIONS,
AIRWAY HEIGHTS CORRECTIONS CENTER,
CITY OF AIRWAY HEIGHTS, ALBERT
TRIPP City Manager of CITY OF AIRWAY
HEIGHTS, CORRECTION OFFICER JARED
BEERBAHN, SUPERINTENDENT JAMES R.
KEY, SANDRA A. (THOMPSON) CONNER
Advanced Registered Nurse Practitioner of
AIRWAY HEIGHTS CORRECTIONS
CENTER, DEBORAH TONHOFFER MD,
STEVEN HAMMOND Chief Medical Officer
for WASHINGTON STATE DEPARTMENT OF
CORRECTIONS, RUSTY SMITH Head of
Medical for AIRWAY HEIGHTS
CORRECTIONS CENTER, JOHN/JANE DOE
1 Employee of CITY OF AIRWAY HEIGHTS,
and JOHN/JANE DOES 2-10,
Defendants.

NO **21202311-32**

COMPLAINT
FOR DAMAGES

COMES NOW the Plaintiff, RICHARD MAYER, by and through his attorney,
DOUGLAS D. PHELPS of PHELPS AND ASSOCIATES P.S., and for a cause of action

COMPLAINT FOR DAMAGES
(Mayer v. State of Washington et al.) - Page 1 of 30

PHELPS AND ASSOCIATES, PS
Attorneys at Law
2903 N. Stout Rd.
Spokane, WA 99206-4373
(509) 892-0467

COPY

1 against the Defendants, STATE OF WASHINGTON, WASHINGTON STATE
2 DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION CENTER,
3 CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY
4 HEIGHTS, CORRECTION OFFICER JARED BEERBAHN, SUPERINTENDENT
5 JAMES R. KEY, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse
6 Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, JOHN/JANE DOE 1
7 Employee of CITY OF AIRWAY HEIGHTS, DEBORAH TONHOFFER MD, STEVEN
8 HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF
9 CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS
10 CORRECTIONS CENTER, and JOHN/JANE DOES 2-10 above-named, alleges as
11 follows:

12 I. JURISDICTION

- 13 1.1 Plaintiff, RICHARD MAYER was at all times relevant hereto a resident of
14 Spokane County, State of Washington and an inmate incarcerated within the
15 AIRWAY HEIGHTS CORRECTION CENTER.
- 16 1.2 Defendant, WASHINGTON STATE is a government entity responsible for the
17 supervision of inmates housed at AIRWAY HEIGHTS CORRECTION
18 CENTER.
- 19 1.3 Defendant AIRWAY HEIGHTS CORRECTION CENTER is a state operated
20 prison facility located in Spokane County, State of Washington
- 21 1.4 Defendant, CITY OF AIRWAY HEIGHTS is a municipal government entity
22 organized under the Revised Code of Washington and located in Spokane,
23 Spokane County, Washington.
- 24 1.5 Defendant ALBERT TRIPP is the City of Airway Heights and signer on
25 contracts with Department of Corrections regarding inmate labor.
- 26 1.6 Defendant SUPERINTENDENT JAMES R. KEY was the superintendent of
27 AIRWAY HEIGHTS CORRECTIONAL CENTER at all times material hereto

28 COMPLAINT FOR DAMAGES

(Mayer v. State of Washington et al.) - Page 2 of 30

PHELPS AND ASSOCIATES, PS
Attorneys at Law
2903 N. Stout Rd.
Spokane, WA 99206-4373
(509) 892-0467

and is believed to be a resident of the County of Spokane, State of Washington.

1.7 Defendant JOHN/JANE DOE 1 was an employee of the CITY OF AIRWAY HEIGHTS Park and Recreation Department onsite during the cleanup.

1.8 Defendant CORRECTION OFFICER JARED BEERBAHN and JOHN/JANE DOES 2-10 are residents of Spokane County, Washington, and were law corrections officers employed by the AIRWAY HEIGHTS CORRECTION CENTER, at all times relevant to this action. All Defendants are believed to reside in Spokane County, Washington.

1.9 Defendant DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER, and SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner were part of medical staff responsible for medical care of Plaintiff RICHARD MAYER along with JOHN/JANE DOES 2-10.

1.10 All acts and omissions alleged herein occurred in the County of Spokane, State of Washington.

1.11 Defendants above named are the proximate cause for the damages to be proved at time of trial and herein alleged.

1.12 The venue is proper in the County of Spokane, State of Washington in that the Defendants and Plaintiffs reside in, and the cause of action arises in the County of Spokane, State of Washington.

1.13 Plaintiff has timely filed a notice pursuant to RCW 4.92.100 to CITY OF AIRWAY HEIGHTS and STATE OF WASHINGTON on June 23, 2020.

1.14 Defendant STATE OF WASHINGTON and CITY OF AIRWAY HEIGHTS have in RCW 4.92.090 accepted liability for the tortious conduct to the same extent as a private person or corporation.

II. FACTS

- 1 2.1 On or about August 24, 2018, the Plaintiff RICHARD MAYER was working
2 as part of an inmate work crew picking up trash in a city park in the CITY OF
3 AIRWAY HEIGHTS.
- 4 2.2 Plaintiff RICHARD MAYER noticed that there were hypodermic needles
5 mixed in with garbage in the park in the CITY OF AIRWAY HEIGHTS.
- 6 2.3 The CORRECTION OFFICER JARED BEERBAHN and JOHN/JANE DOE
7 1 Employee of CITY OF AIRWAY HEIGHTS, accompanied AIRWAY
8 HEIGHTS CORRECTION CENTER work crew, observed the visible needles
9 and told the workers to be careful (**Exhibit A1 – Response**).
- 10 2.4 Defendants CITY OF AIRWAY HEIGHTS, AIRWAY HEIGHTS
11 CORRECTION CENTER, ALBERT TRIPP City Manager for CITY OF
12 AIRWAY HEIGHTS, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY
13 HEIGHTS, and CORRECTION OFFICER JARED BEERBAHN did not offer
14 or provide the work crew and Plaintiff RICHARD MAYER with proper
15 protective equipment for collecting hazardous and infectious/infectious
16 materials including medical waste with syringes. (**Exhibit D – Response**)
- 17 2.5 Defendants CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager
18 of CITY OF AIRWAY HEIGHTS, and AIRWAY HEIGHTS CORRECTION
19 CENTER pursuant to contract made agreements that risk assessment was to
20 be performed and which party was to provide personal protections equipment
21 to inmate workers. (**Exhibit B – Crew Work Master Agreement**)
- 22 2.6 Plaintiff RICHARD MAYER requested CORRECTION OFFICER JARED
23 BEERBAHN and JOHN/JANE DOE 1 Employee of CITY OF AIRWAY
24 HEIGHTS for protective equipment for picking up such hazardous and
25 infectious materials and medical waste with syringes (**Exhibit C1 – Medical
26 Records**).
- 27 2.7 Plaintiff RICHARD MAYER was not provided adequate protective
28 equipment for picking up such hazardous and infectious materials and medical

waste but was instructed to pick up the hazardous and infectious materials.

(Exhibit D – Response)

2.8 Plaintiff RICHARD MAYER recognizing that a failure to comply with an order from a correctional officer could result in discipline and punishment reluctantly complied to avoid punishment and other sanctions.

2.9 CORRECTIONS OFFICER JARED BEERBAHN and JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS failed to suspend the cleanup work to arrange for protective equipment or proper safety measures to protect inmates including the Plaintiff RICHARD MAYER. **(Exhibit D- Response)**

2.10 Plaintiff RICHARD MAYER did as instructed and started to pick up the hazardous and infectious materials including syringes without the requested and proper protective equipment based on orders from OFFICER JARED BEERBAHN and JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS.

2.11 In the process of picking up the hazardous and infectious material., Plaintiff RICHARD MAYER was stuck with a needle that was hazardous and infectious medical waste with sharps including syringes. **(Exhibit E)**

2.12 Plaintiff RICHARD MAYER notified CORRECTION OFFICER JARED BEERBAHN and JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS immediately after he was stuck with the needle on a syringe.

2.13 Plaintiff RICHARD MAYER was transported back to AIRWAY HEIGHTS CORRECTION CENTER MSU medical for medical treatment.

2.14 Plaintiff RICHARD MAYER was on that day tested for HIV and Hepatitis C and tested negative.

2.15 Plaintiff RICHARD MAYER was reportedly given Truvada and Raltegravir to prevent contracting HIV and other diseases by SANDRA A. (THOMPSON) CONNER, Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER

1 MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON
2 STATE DEPARMENT OF CORRECTIONS, and RUSTY SMITH Head of
3 Medical for AIRWAY HEIGHTS CORRECTIONS CENTER supervised
4 medical care at the MSU. **(Exhibit C5 & C6 – Medical Records)**

5 2.16 On or about October 3, 2018, Plaintiff RICHARD MAYER was notified by
6 Zina Blancher, Registered Nurse for AIRWAY HEIGHTS CORRECTIONS
7 CENTER, that he was given the wrong dosage of Truvada and Raltegravir by
8 SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse
9 Practitioner supervised by, DEBORAH TONHOFFER MD, STEVEN
10 HAMMOND Chief Medical Officer for WASHINGTON STATE
11 DEPARMENT OF CORRECTIONS, and RUSTY SMITH Head of Medical
12 for AIRWAY HEIGHTS CORRECTIONS CENTER. **(Exhibit C2 & C4 –
13 Medical Records)**

14 2.17 Zina Blancher, Registered Nurse for AIRWAY HEIGHTS CORRECTIONS
15 CENTER, advised Plaintiff RICHARD MAYER that due to his receiving the
16 incorrect dosage of the preventative medication it will not be effective in
17 treating him.

18 2.18 Plaintiff RICHARD MAYER tested negative twice for HIV and Hepatitis C.

19 2.19 Plaintiff RICHARD MAYER later was advised that he tested positive for
20 Hepatitis C on or about November 28, 2018. **(Exhibit D - Response)**

21 2.20 As a result of this incident and negligent medical treatment, Plaintiff
22 RICHARD MAYER contracted Hepatitis C after being given the incorrect
23 dosage of the preventive medication for HIV, Hepatitis C, and other diseases.

24 2.21 As a result of this incident, Plaintiff RICHARD MAYER now has Alopecia
25 and other health issues due to the stress related to the disease of Hepatitis C.

26 2.22 As a result of this incident, Plaintiff RICHARD MAYER suffers injuries both
27 mental and physical, which are continuous and ongoing.

28 2.23 AIRWAY HEIGHTS CORRECTION CENTTER, CITY OF AIRWAY

1 HEIGHTS, and ALBERT TRIPP City Manager of CITY OF AIRWAY
2 HEIGHTS used inmate labor for very hazardous and infectious and dangerous
3 duties collecting hazardous and infectious and dangerous medical waste
4 without providing any protective equipment. **(Exhibit A2 - Response)**

5 2.24 As a result of AIRWAY HEIGHTS CORRECTION CENTER, ALBERT
6 TRIPP City Manager of CITY OF AIRWAY HEIGHTS. and CITY OF
7 AIRWAY HEIGHTS not providing the inmate work crew with proper
8 equipment for picking up hazardous and infectious waste, Plaintiff RICHARD
9 MAYER suffers mental and physical damages including a chronic illness after
10 the needle stick.

11 2.25 As a result of CORRECTION OFFICER JARED BEERBAHN, AIRWAY
12 HEIGHTS CORRECTION CENTER, CITY OF AIRWAY HEIGHTS,
13 JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, and
14 ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, not
15 providing proper equipment when requested by inmate workers including,
16 Plaintiff RICHARD MAYER suffers mental and physical damages.

17 2.26 As a result of AIRWAY HEIGHTS CORRECTION CENTER MSU SANDRA
18 A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for
19 AIRWAY HEIGHTS CORRECTIONS CENTER supervised by, DEBORAH
20 TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for
21 WASHINGTON STATE DEPARTMENT OF CORRECTIONS, and RUSTY
22 SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS
23 CENTER provided improper dosage of medication, Plaintiff RICHARD
24 MAYER has contracted Hepatitis C and other diseases yet to be identified.
25 **(Exhibit C3 & C4 – Medical Records)**

26 2.27 Hepatitis C virus is one of the most important causes of chronic liver disease
27 in the United States. It is an RNA virus. While it accounts for 15 percent of
28 acute viral hepatitis, it is responsible for nearly 70 percent of chronic hepatitis,

1 and up to 50 percent of cirrhosis, end-stage liver disease, and liver cancer in
2 the United States. The hepatitis C virus mutates rapidly and changes the
3 protein composition of the protein envelope which surrounds it. This allows it
4 to evade the immune system and, for this reason, it has been difficult to
5 develop a vaccine to hepatitis C. Genotypes 1a and 1b are most common in
6 the United States (75 percent of cases.)

7 2.28 Hepatitis C transmission occurs primarily through exposure to infected blood.

8 2.29 The biggest threat from hepatitis C infection is that the acute disease fails to
9 resolve in most instances and the disease advances to chronic hepatitis C. The
10 most common sequelae of chronic HCV infection are progressive liver
11 fibrosis leading to cirrhosis, end-stage liver disease and hepatocellular
12 carcinoma. Treatment is most effective when the degree of fibrosis is
13 minimal.

14 2.30 HCV infection is diagnosed by blood tests. These tests detect antibodies that
15 the body makes to the hepatitis C virus. If the patient is determined to have
16 detectable virus in his blood over a period of month, he is considered to have
17 chronic hepatitis C. The standard of care for treatment in the United States has
18 been set forth by the National Instituted of Health.

19 2.31 If the patient is infected with genotype 1, then he should be offered a liver
20 biopsy. It is used to determine the amount of scarring (fibrosis) present in the
21 liver and this information is critical to deciding on whether to treat with the
22 antiviral drugs.

23 2.32 After diagnosis of HCV, proper ongoing healthcare is critical so the infected
24 person can be evaluated by a specialist and referred to appropriate medical
25 care.

26 2.33 Virtually all experts recommend treatment for patients with Stage II disease,
27 as determined by liver biopsy. Therapy for HCV can take months is
28 complicated and very expensive. Effective treatment reduces but does not

eliminate the risk of developing liver cancer. Liver transplant is the only treatment for end stage liver cancer.

- 2.34 The work program utilizes inmates who work for underpaid amounts of money and opportunities to spend time in the community.
- 2.35 As part of the state labor programs the WASHINGTON STATE DEPARTMENT OF CORRECTIONS withholds funds which are then utilized to pay of fines and fees imposed by the court.
- 2.36 On June 23, 2020 and June 19, 2020, STATE OF WASHINGTON and CITY OF AIRWAY HEIGHTS were served with a notice of claim as required by RCW 4.92.100.
- 2.37 There has been no response or attempt to settle the claims after notice.

III. CAUSE OF ACTION FOR VIOLATION OF PLAINTIFF'S CONSTITUTIONAL RIGHTS UNDER COLOR OF LAW PURSUANT TO 42 USC § 1983 (THE CIVIL RIGHTS ACT)

Plaintiff RICHARD MAYER re-alleges and incorporates the foregoing paragraphs as if fully set forth herein, paragraph 2.1 to 2.37 as paragraphs 3.1 to 3.37.

- 3.38 The Defendants caused or failed to prevent injury to Plaintiff RICHARD MAYER in violation of his rights under 42 USC § 1983 and the 4th, 14th, and 8th Amendments to the U.S. Constitution as well as Washington State Constitution Article I Section 3, 7, 14, and 35..
- 3.39 The Defendants used policies, procedures and/or custom to endanger inmates by involving inmate workers in performance of hazardous and infectious labor while denying them proper safety and protective equipment to perform hazardous and infectious labor demonstrating deliberate indifference for the safety for inmate workers including RICHARD MAYER.
- 3.40 That the Defendants, STATE OF WASHINGTON, WASHINGTON STATE

1 DEPARTMENT OF CORRECTIONS, CITY OF AIRWAY HEIGHTS,
2 ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS,
3 JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, AIRWAY
4 HEIGHTS CORRECTION CENTER, CORRECTIONS OFFICER JARED
5 BEERBAHN, SANDRA A. (THOMPSON) CONNER Advanced Registered
6 Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER,
7 DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer
8 for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY
9 SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS
10 CENTER and SUPERINTENDENT JAMES R. KEY by custom, policy, or
11 practice exhibiting deliberate indifference in the care of inmates caused the
12 injury to Plaintiff RICHARD MAYER.

13 3.41 That the Defendants STATE OF WASHINGTON, WASHINGTON STATE
14 DEPARTMENT OF CORRECTIONS, CORRECTIONS OFFICER JARED
15 BEERBAHN, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City
16 Manager of CITY OF AIRWAY HEIGHTS, AIRWAY HEIGHTS
17 CORRECTION CENTER, SANDRA A. (THOMPSON) CONNER Advanced
18 Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS
19 CENTER supervised by, DEBORAH TONHOFFER MD, STEVEN
20 HAMMOND Chief Medical Officer for WASHINGTON STATE
21 DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for
22 AIRWAY HEIGHTS CORRECTIONS CENTER, JOHN/JANE DOE 1
23 Employee of CITY OF AIRWAY HEIGHTS, and SUPERINTENDANT
24 JAMES R. KEY have and continue to use inmate labor to perform dangerous
25 and hazardous and infectious activities to enrich the State and the Department
26 of Corrections demonstrating deliberate indifference for inmate safety.

27 3.42 As a result of the deprivations and violations to Plaintiff RICHARD
28 MAYER's rights, Plaintiff RICHARD MAYER suffered and continues to

suffer injury and as a result of this incident and injuries including but not limited to physical, psychological and emotional.

3.43 The Defendants acted with reckless and callous deliberate indifference to Plaintiff RICHARD MAYER's rights and failed to prevent injury to Plaintiff RICHARD MAYER which was a violation of his rights pursuant to Article I Section 3, 7, 14, and 35 of the Washington State Constitution and the 4th, 8th, and 14th Amendments to the Constitution of the United States.

3.44 That the Defendants, STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, CORRECTIONS OFFICER JARED BEERBAHN, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, AIRWAY HEIGHTS CORRECTION CENTER, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER supervised by, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, and SUPERINTENDENT JAMES R. KEY by custom, policy, or practice acted with deliberate indifference and caused the deprivation of the rights of Plaintiff RICHARD MAYER.

3.45 That as a result of the violations of Plaintiff RICHARD MAYER's Washington State and United States Constitutional Rights, Plaintiff RICHARD MAYER suffered and continues to suffer injury as a result of his detention and work programs which failed to protect him, and other inmates engaged in hazardous and infectious work activities.

IV. CAUSE OF ACTION FOR NEGLIGENT TRAINING, RETENTION

AND SUPERVISION

Plaintiff re-alleges and incorporates the foregoing paragraphs as if fully set forth herein, paragraph 2.1 to 2.37 as paragraphs 4.1 to 4.37.

4.38 That the government defendants, STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION CENTER, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER supervised by, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER supervised by, and SUPERINTENDENT JAMES R. KEY, are liable for the actions of their employees and for failing to train said employees in the proper procedures when involving inmate labor in performing highly dangerous and hazardous and infectious activities demonstrating a deliberate indifference for the health and safety of inmate workers.

4.39 That as a result of the actions or inactions of the employees of STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION CENTER, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS

CENTER supervised the medical care, and SUPERINTENDENT JAMES R. KEY, Plaintiff suffered and continues to suffer injury and ongoing debilitating illness.

4.40 That STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION CENTER, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER supervised by, and SUPERINTENDENT JAMES R. KEY, failed to adequately and fully train corrections officers in supervising hazardous and infectious activities, resulting in the injury and infection of the Plaintiff RICHARD MAYER.

4.41 That as a result of the negligent supervision and training, Plaintiff suffered and continues to suffer injury and continuing chronic illness.

4.42 That as a result of the actions or inactions of the employees of STATE OF WASHINGTON, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION CENTER, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS

CENTER, and SUPERINTENDENT JAMES R. KEY, Plaintiff suffered and continues to suffer injury, chronic illness, and mental stress.

4.43 That STATE OF WASHINGTON, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION CENTER, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER, and SUPERINTENDENT JAMES R. KEY, failed to adequately and fully train and supervise correctional officers and staff, resulting in the injury to the Plaintiff.

V. CAUSE OF ACTION FOR COMMON LAW NEGLIGENCE

Plaintiff re-alleges and incorporates the foregoing paragraphs as if fully set forth herein, paragraph 2.1 to 2.37 as paragraphs 5.1 to 5.37.

5.38 That the Defendants STATE OF WASHINGTON, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION CENTER, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER, JOHN/JANE DOE 2-10,

1 and SUPERINTENDENT JAMES R. KEY, including CORRECTION
2 OFFICER JARED BEERBAHN, failed to prevent injury to Plaintiff
3 RICHARD MAYER in violation of their common law duty to properly equip
4 inmate workers with the necessary protective equipment when performing
5 dangerous and hazardous and infectious activities in handling hazardous and
6 infectious medical waste. Further, the medical personnel were negligent in the
7 care and treatment of RICHARD MAYER.

8 5.39 That the Defendants STATE OF WASHINGTON, CITY OF AIRWAY
9 HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY
10 HEIGHTS, WASHINGTON STATE DEPARTMENT OF CORRECTIONS,
11 AIRWAY HEIGHTS CORRECTION CENTER, CORRECTIONS OFFICER
12 JARED BEERBAHN, SANDRA A. (THOMPSON) CONNER Advanced
13 Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS
14 CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief
15 Medical Officer for WASHINGTON STATE DEPARTMENT OF
16 CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS
17 CORRECTIONS CENTER, JOHN/JANE DOE 2-10, JOHN/JANE DOE 1
18 Employee of CITY OF AIRWAY HEIGHTS, and SUPERINTENDENT
19 JAMES R. KEY failed to provide proper equipment to correctional staff and
20 inmates including CORRECTION OFFICER JARED BEERBAHN that
21 failure to address the proper protection of their inmate workers when dealing
22 with highly hazardous and infectious medical waste resulted in injury to
23 Plaintiff RICHARD MAYER. Additionally, the medical care provided was
24 below the standard of care for those exposed to medical sticks.

25 5.40 As a result the negligence of the Defendants Plaintiff RICHARD MAYER
26 suffers from a physical and mental injuries from being stuck by a hypodermic
27 needle and subsequent improper medical treatment, which caused him to
28 contract the Hepatitis C disease, a chronic illness.

1 5.41 As a result of STATE OF WASHINGTON, CITY OF AIRWAY HEIGHTS,
2 ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS,
3 WASHINGTON STATE DEPARTMENT OF CORRECTIONS, AIRWAY
4 HEIGHTS CORRECTION CENTER, CORRECTIONS OFFICER JARED
5 BEERBAHN, SANDRA A. (THOMPSON) CONNER Advanced Registered
6 Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER,
7 DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer
8 for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY
9 SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS
10 CENTER, JOHN/JANE DOE 2-10, JOHN/JANE DOE 1 Employee of CITY
11 OF AIRWAY HEIGHTS, and SUPERINTENDENT JAMES R. KEY
12 negligence and deliberate indifference in failing to provide protective
13 equipment medical care and training to Plaintiff RICHARD MAYER, he was
14 stuck by a hypodermic needle when ordered to pick up highly hazardous and
15 infectious medical waste.

16 5.42 In failing to provide protective equipment, medical care, and training for
17 inmate workers and correctional staff picking up hazardous and infectious
18 waste, CORRECTION OFFICER JARED BEERBAHN, ALBERT TRIPP
19 City Manager of CITY OF AIRWAY HEIGHTS, and JOHN/JANE DOE 1
20 Employee of CITY OF AIRWAY HEIGHTS inaction endangered and
21 resulted in the injury to Plaintiff RICHARD MAYER demonstrating common
22 law negligence and deliberate indifference to safety and health of inmate
23 workers.

24 5.43 The CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY
25 OF AIRWAY HEIGHTS, STATE OF WASHINGTON, WASHINGTON
26 STATE DEPARTMENT OF CORRECTIONS, JOHN/JANE DOE 1
27 Employee of CITY OF AIRWAY HEIGHTS, JOHN/JANE DOES 2-10, and
28 CORRECTION OFFICER JARED BEERBAHN's deliberate indifference and

negligent conduct creating a risk that Plaintiff RICHARD MAYER would be stuck by a hypodermic needle and became infected with a highly infectious disease causing a chronic illness.

5.44 As a result Plaintiff RICHARD MAYER was stuck by a hypodermic needle, causing RICHARD MAYER to contract the Hepatitis C disease, which could have been prevented if CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, CORRECTION OFFICER JARED BEERBAHN, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, JOHN/JANE DOES 2-10, and WASHINGTON STATE DEPARTMENT OF CORRECTIONS would have provided the proper protective equipment that was requested by RICHARD MAYER.

5.45 As a result of the negligent medical care provided by Defendant SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, and JOHN/JANE DOES 2-10, Plaintiff RICHARD MAYER was given a dosage of medication which failed to protect him from Hepatitis C demonstrating a deliberate indifference in the treatment of inmate workers.

VI. CAUSE OF ACTION FOR NEGLIGENT INFLECTION OF EMOTIONAL DISTRESS

Plaintiff re-alleges and incorporates the foregoing paragraphs as if fully set forth herein, paragraph 2.1 to 2.37 as paragraphs 6.1 to 6.37.

6.38 On or about August 24, 2018, at the CITY OF AIRWAY HEIGHTS, in the County Of Spokane, State of Washington, Defendants STATE OF WAHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, AIRWAY HEIGHT CORRECTION CENTER,

1 SUPERINTENDENT JAMES R. KEY, SANDRA A. (THOMPSON) CONNER
2 Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS
3 CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN
4 HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT
5 OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY
6 HEIGHTS CORRECTIONS CENTER, JOHN/JANE DOES 2-10, and
7 CORRECTION OFFICER JARED BEERBAHN ordered Plaintiff RICHARD
8 MAYER, to pick up hazardous and infectious material and waste without
9 protective equipment causing Plaintiff RICHARD MAYER to suffer intentional
10 infliction of emotional distress by Defendants STATE OF WASHINGTON,
11 WASHINGTON STATE DEPARTMENT OF CORRECTIONS, CITY OF
12 AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY
13 HEIGHTS, AIRWAY HEIGHT CORRECTION CENTER,
14 SUPERINTENDENT JAMES R. KEY, JOHN/JANE DOE 1 Employee of CITY
15 OF AIRWAY HEIGHTS, and CORRECTION OFFICER JARED BEERBAHN.

16 6.39 Plaintiff RICHARD MAYER was ordered to pick up hazardous and infectious
17 material and waste in the CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City
18 Manager of CITY OF AIRWAY HEIGHTS, and JOHN/JANE DOE 1 Employee
19 of CITY OF AIRWAY HEIGHTS, while Defendants STATE OF
20 WASHINGTON, WASHINGTON STATE DEPARTMENT OF
21 CORRECTIONS, AIRWAY HEIGHT CORRECTION CENTER,
22 SUPERINTENDENT JAMES R. KEY, JOHN/JANE DOE 1 Employee of CITY
23 OF AIRWAY HEIGHTS, JOHN/JANE DOES 2-10, a ALBERT TRIPP City
24 Manager of CITY OF AIRWAY HEIGHTS, and CORRECTION OFFICER
25 JARED BEERBAHN denied RICHARD MAYER protective equipment to pick
26 up the highly hazardous and infectious medical waste.

27 6.40 Plaintiff RICHARD MAYER picked up the hazardous and infectious material
28 without protective equipment and without adequate training in proper handling of

hazardous and infectious materials.

6.41 Plaintiff RICHARD MAYER was stuck with a hypodermic needle while picking up hazardous and infectious materials and waste for the CITY OF AIRWAY HEIGHTS and WASHINGTON STATE DEPARTMENT OF CORRECTIONS.

6.42 Defendants STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, AIRWAY HEIGHTS CORRECTION CENTER, SUPERINTENDENT JAMES R. KEY, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER; and CORRECTION OFFICER JARED BEERBAHN's denial of protective equipment for Plaintiff RICHARD MAYER was negligent and caused Plaintiff RICHARD MAYER emotional distress and injuries.

6.43 That as a result of the actions of Defendants STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, AIRWAY HEIGHTS CORRECTION CENTER, SUPERINTENDENT JAMES R. KEY, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, and CORRECTION OFFICER JARED BEERBAHN,

1 Plaintiff RICHARD MAYER suffers injury to his person including a highly
2 infectious disease.

3 6.44 Defendants STATE OF WASHINGTON, WASHINGTON STATE
4 DEPARTMENT OF CORRECTIONS, CITY OF AIRWAY HEIGHTS,
5 ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, AIRWAY
6 HEIGHT CORRECTION CENTER, SUPERINTENDENT JAMES R. KEY,
7 SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner
8 for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER
9 MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE
10 DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for
11 AIRWAY HEIGHTS CORRECTIONS CENTER JOHN/JANE DOE 1
12 Employee of CITY OF AIRWAY HEIGHTS, and CORRECTION OFFICER
13 JARED BEERBAHN negligently and needlessly inflicted emotional distress
14 upon Plaintiff RICHARD MAYER.

15 6.45 Defendant STATE OF WASHINGTON, WASHINGTON STATE
16 DEPARTMENT OF CORRECTIONS, SUPERINTENDENT JAME R. KEY,
17 SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner
18 for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER
19 MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE
20 DEPARTMENT OF CORRECTIONS, and RUSTY SMITH Head of Medical for
21 AIRWAY HEIGHTS CORRECTIONS CENTER Plaintiff RICHARD MAYER
22 substandard medical care and treatment for chronic illness.

23 6.46 As a result of Defendants STATE OF WASHINGTON, WASHINGTON STATE
24 DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION
25 CENTER, SUPERINTENDENT JAMES R. KEY, SANDRA A. (THOMPSON)
26 CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS
27 CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN
28 HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT

1 OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY
2 HEIGHTS CORRECTIONS CENTER, JOHN/JANE DOE 1 Employee of CITY
3 OF AIRWAY HEIGHTS, and CORRECTION OFFICER JARED BEERBAHN
4 actions, Plaintiff RICHARD MAYER was injured, suffered and continues to
5 suffer physical disabilities, physical and psychological pain, and suffering,
6 medical expenses and other out-of-pocket expenses, loss of earnings and earning
7 capacity, and other damages.

8 VII. CASUE OF ACTION FOR UNJUST ENRICHMENT

9 Plaintiff re-alleges and incorporates Paragraph 2.1 to 2.37 as Paragraphs
10 7.1 to 7.37.

11 7.38 Defendants STATE OF WASHINGTON, CITY OF AIRWAY HEIGHTS,
12 and ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, paid
13 the inmate workers minimal wages even less than the Washington State or
14 Federal minimum wage amounts for performing hazardous work activities.

15 7.39 That both the STATE OF WASHINGTON, CITY OF AIRWAY HEIGHTS,
16 and ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS,
17 benefit from the low level of compensation and inadequate protective
18 equipment to the inmate workers including RICHARD MAYER.

19 7.40 As a result of the low level of compensation paid to RICHARD MAYER as
20 an inmate worker both the CITY OF AIRWAY HEIGHTS and ALBERT
21 TRIPP City Manager of CITY OF AIRWAY HEIGHTS here wrongfully
22 benefited from the low level of compensation paid to the inmate workers
23 involved in hazardous work activities and from the failure to provide adequate
24 protective equipment.

25 7.41 The inmate worker program provides financial benefits to CITY OF
26 AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY
27 HEIGHTS, and the STATE OF WASHINGTON due to the inmate worker
28

being paid below minimum wage and well below prevailing wage to perform need maintenance of public facilities the CITY OF AIRWAY HEIGHTS and STATE OF WASHINGTON were unjustly enriched for inmate labor.

- 7.42 Further, the inmates wages are subject to withholding of funds to pay for fines and fees from the minimal payments made to RICHARD MAYER as an inmate worker.
- 7.43 The minimal wage paid to inmate workers are withheld and are used to benefit the State of Washington and the CITY OF AIRWAY HEIGHTS.
- 7.44 The government agencies are unjustly enriched from the labor of the inmate workers forced to work under dangerous conditions at slave labor wages while not properly equipped for the dangerous labor.

VI. CAUSE OF ACTION FOR VIOLATION OF PLAINTIFF'S CONSTITUTIONAL RIGHTS PURSUANT TO THE CONSTITUTION OF THE UNITED STATES AND THE WASHINGTON STATE CONSTITUTION

Plaintiff RICHARD MAYER re-alleges and incorporates paragraphs 2.1 to 2.37 as paragraphs 8.1 to 8.37.

- 8.38 The Defendants acted with reckless and callous indifference to RICHARD MAYER's rights and failed to prevent injury to RICHARD MAYER which was a violation of his rights pursuant to Article I Section 3, 7, 14, and 35 of the Washington State Constitution and the Fourth, Eighth and Fourteenth Amendments to the Constitution of the United States.
- 8.39 That STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, AIRWAY HEIGHTS CORRECTIONS CENTER, SUPERINTENDENT JAMES R. KEY, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE

1 DEPARMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for
2 AIRWAY HEIGHTS CORRECTIONS CENTER, JOHN/JANE DOE 1
3 Employee of CITY OF AIRWAY HEIGHTS, JOHN/JANE DOES 2-10, and
4 CORRECTION OFFICER JARED BEERBAHN by custom, policy, or practice
5 caused the deprivation of the rights of RICHARD MAYER by endangering his
6 safety by ordering RICHARD MAYER to pick up hazardous and infectious
7 materials and waste while denying him proper safety and protective equipment
8 required to perform hazardous and infectious labor.

9 8.40 That as a result of the violations to RICHARD MAYER's Washington State and
10 United States Constitutional Rights, RICHARD MAYER suffered and continues
11 to suffer injury as a result of not being equipped with proper protective
12 equipment for handling hazardous and infectious materials and waste
13 demonstrating deliberate indifference by the Defendant.

14 8.41 The Plaintiff RICHARD MAYER has a right to life and to maintain health and
15 human integrity which the STATE OF WASHINGTON DEPARTMENT OF
16 CORRECTIONS, CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City
17 Manager of CITY OF AIRWAY HEIGHTS, and SUPERINTENDANT JAMES
18 R. KEY failed to provide to inmate RICHARD MAYER.

19 8.42 The Plaintiff RICHARD MAYER suffers daily from the symptoms of HCV
20 because of CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of
21 CITY OF AIRWAY HEIGHTS, STATE OF WASHINGTON, WASHINGTON
22 STATE DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS
23 CORRECTION CENTER, SUPERINTENDENT JAMES R. KEY, SANDRA A.
24 (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY
25 HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN
26 HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARMENT
27 OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY
28 HEIGHTS CORRECTIONS CENTER, JOHN/JANE DOE 1 Employee of CITY

OF AIRWAY HEIGHTS, JOHN/JANE DOES 2-10, and CORRECTION OFFICER JARED BEERBAHN, violations of his civil rights in acting with deliberate indifference to the injuries of inmate workers including RICHARD MAYER.

IX. CAUSE OF ACTION FOR *MONELL* LIABILITY

Plaintiff re-alleges and incorporates Paragraph 2.1 to 2.37 as Paragraphs 9.1 to 9.37.

9.38 The acts or failures to act of the above individually names defendants, acting under the color of state law, deprived RICHARD MAYER of his right to be free from unreasonable and excessive punishment violation of the Eight Amendment of the United States Constitution, made applicable to the states through the Fourteenth Amendment of the United States Constitution.

9.39 The training policies of Defendants CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTION, AIRWAY HEIGHTS CORRECTION CENTER, SUPERINTENDENT JAMES R. KEY, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER, CORRECTION OFFICER JARED BEERBAHN, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, and JOHN/JANE DOES 2-10 were not adequate to prevent violations of law by its corrections officers or to train its corrections

officers to handle and supervise inmate workers collecting hazardous and infectious/infectious materials to protect inmate workers.

9.40 Defendants CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION CENTER, SUPERINTENDENT JAMES R. KEY, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER, JOHN/JANE DOE 1 Employee of CITY OF AIRWAY HEIGHTS, JOHN/JANE DOES 2-10, and CORRECTION OFFICER JARED BEERBAHN were deliberately indifferent to the substantial risk that its policies were inadequate to prevent injuries of inmates handling hazardous and infectious/infectious material by its employees and for the known or obvious consequences of its failure to train its corrections officers to handle the usual and recurring situations with which they must deal.

9.41 The failure of Defendants CITY OF AIRWAY HEIGHTS, ALBERT TRIPP City Manager of CITY OF AIRWAY HEIGHTS, STATE OF WASHINGTON, WASHINGTON STATE DEPARTMENT OF CORRECTIONS, AIRWAY HEIGHTS CORRECTION CENTER, SUPERINTENDENT JAMES R. KEY SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY

1 HEIGHTS CORRECTIONS CENTER JOHN/JANE DOE 1 Employee of CITY
2 OF AIRWAY HEIGHTS, JOHN/JANE DOES 2-10, and CORRECTION
3 OFFICER JARED BEERBAHN protect inmates handling hazardous and
4 infectious/infectious materials by its corrections officers and to provide
5 adequate training to its corrections officers caused the deprivation of
6 RICHARD MAYER's rights by STATE OF WASHINGTON,
7 WASHINGTON STATE DEPARTMENT OF CORRECTIONS and CITY
8 OF AIRWAY HEIGHTS ; that is, STATE OF WASHINGTON,
9 WASHINGTON STATE DEPARTMENT OF CORRECTIONS,
10 SUPERINTENDENT JAMES R. KEY, JOHN/JANE DOE 1 Employee of CITY
11 OF AIRWAY HEIGHTS, CITY OF AIRWAY HEIGHTS, SANDRA A.
12 (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY
13 HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN
14 HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT
15 OF CORRECTIONS, RUSTY SMITH Head of Medical for AIRWAY
16 HEIGHTS CORRECTIONS CENTER, and ALBERT TRIPP City Manager of
17 CITY OF AIRWAY HEIGHTS, failures to protect inmates by its officers and
18 failures to train its officers is so closely related to deprivations of
19 RICHARD MAYER's rights in forcing inmates to handle hazardous and
20 infectious/infectious materials by Mr. RICHARD MAYER.

21 9.42 As a result of the violations of the constitutional standards set forth herein,
22 RICHARD MAYER has contracted a very serious life-threatening disease.
23 Plaintiff RICHARD MAYER, suffered and continues to suffer injury as a
24 result, including but not limited to psychological and emotional injuries.
25 The extent of damages will be fully proven at trial.

26 9.43 Plaintiff was required to hire attorneys to represent him in this matter and
27 is entitled to an award of reasonable attorneys' fees and costs pursuant to

**X. CAUSE OF ACTION FOR NEGLIGENT MEDICAL CARE AND
TREATMENT**

Plaintiff re-alleges and incorporates Paragraph 2.1 to 2.37 as Paragraphs 10.1 to 10.37.

10.38 That medical treatment given to RICHARD MAYER was below the standard of care required in treating persons exposed to hazardous medical sticks.

10.39 That medical personnel, SANDRA A. (THOMPSON) CONNER Advanced Registered Nurse Practitioner for AIRWAY HEIGHTS CORRECTIONS CENTER, DEBORAH TONHOFFER MD, STEVEN HAMMOND Chief Medical Officer for WASHINGTON STATE DEPARTMENT OF CORRECTIONS, and RUSTY SMITH Head of Medical for AIRWAY HEIGHTS CORRECTIONS CENTER prescribed and provided Plaintiff RICHARD MAYER an incorrect dosage of medication to protect from Hepatitis C.

10.40 That a result of the incorrect dosage of a prescription and improper administration of medications including Truvada and Raltegravir Plaintiff RICHARD MAYER has contracted Hepatitis C.

10.41 Plaintiff RICHARD MAYER was forced to utilize the medical care provided by the WASHINGTON STATE DEPARTMENT OF CORRECTIONS which was below the standard of care for patients in the STATE OF WASHINGTON.

XI. RELIEF SOUGHT


WHEREFORE, the Plaintiff prays for judgment against the Defendants,

1 jointly and severally, in an amount that will fairly compensate the Plaintiff for all
2 damages sustained, costs, and reasonable attorneys' fees and costs, interest calculated at
3 the maximum amount allowable by the law, and any other relief the Court deems just,
4 including but not limited to:

- 5 11.1 Past and future medical expenses
- 6 11.2 Past and future emotional and psychological counseling costs
- 7 11.3 Past and future loss of earnings
- 8 11.4 Permanent and partial impairment of earnings and earning capacity
- 9 11.5 Pain and suffering
- 10 11.6 Past and future permanent and partial disability
- 11 11.7 Loss of enjoyment of life
- 12 11.8 Past and future special damages
- 13 11.9 Interest calculated at the maximum amount allowable by law,
14 including prejudgment interest
- 15 11.10 Injunctive relief to prevent future actions to protect other inmates
16 similarly situated
- 17 11.11 Punitive damages
- 18 11.12 Actual or compensatory damages
- 19 11.13 Nominal damages
- 20 11.14 Attorneys' fees and cost
- 21 11.15 Cost and disbursements herein in an amount to be proven at the time of
22 trial
- 23 11.16 Such other relief as the Court believes is equitable and just.

1 DATED this 18th day of August, 2021.

2 PHELPS & ASSOCIATES, P.S.

3 
4 DOUGLAS D. PHELPS, WSBA#22620
5 2903 N. Stout Road
6 Spokane, WA 99206
7 Tel: (509) 892-0467
8 Fx: (509) 921-0802
9 phelps@phelpslaw1.com

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28 COMPLAINT FOR DAMAGES
(Mayer v. State of Washington et al.) - Page 29 of 30

PHELPS AND ASSOCIATES, PS
Attorneys at Law
2903 N. Stout Rd.
Spokane, WA 99206-4373
(509) 892-0467

EXHIBIT A

EX A1



LOG I.D. NUMBER

18662700

APPEAL TO LEVEL II
APELACIÓN AL 2DO NIVEL

Name: NOMBRE:	Last APELLIDO	First PRIMERO NOMBRE	Middle 2DO NOMBRE	DOC Number NUMERO DOC	Facility/FACILIDAD Office	Unit/Cell UNIDAD/CELDA
	Mayer	Richard	A	846287	AHCC	C5 D022
PART A - INITIAL GRIEVANCE/PARTE A - QUEJA INICIAL				Date Typed 10/15/2018	Date Due 11/13/2018	

I WANT TO APPEAL: I appeal to make sure the proper changes are implemented throughout the state and to exhaust my administrative remedies.

SUGGESTED REMEDY: Same as the remedy suggested in my initial complaint, with an emphasis on implementing the changes statewide.

/s/ J. Martin

10/15/2018

/s/ Richard Mayer

9/19/18

 Grievance Coordinator Signature
 FIRMA DE COORDINADOR DE QUEJAS

 Date
 FECHA

 Grievant Signature
 FIRMA DE QUEJANTE

 Date
 FECHA

PART B - LEVEL II RESPONSE/PARTE B RESPUESTA 2DO NIVEL

Your Level 2 appeal concerning being stuck by a needle on security crew was investigated by Sgt. Baker and you were interviewed to gather the facts surrounding this complaint. Reports show that you were stuck by a needle while picking up a trash bag in the community of Airway Heights. On this day, your crew was completed with the trash detail and had moved on to routine grounds type clean up where a large bag of trash was observed at that location. It was decided that the bag would be removed, as the Officer escorting you did not know a needle was present under the bag of trash. After conducting interviews, reviewing reports, and reviewing the rules/expectations of Offsite Work crews, it has been determined that no misconduct occurred during this incident. Security Crew workers are not expected to pick up dangerous items and are required to advise their supervisors when they encounter such items. You acknowledged this by your signature that you reviewed, understood, and agreed with all the expectations in regards to reporting unsafe working conditions and hazards.

However, because of the seriousness of the potential safety issue in the future, implementations were made immediately as recommended by the Safety Officer. These recommendation include the use of cut proof gloves, hand held grabbers, easily available sharps containers, and proper notification procedures are followed for needles or hazardous materials.

 Superintendent, Work Release Supervisor, Field Administrator Signature
 SUPERINTENDENTE

 11/20/18
 Date
 FECHA

You may appeal this response by submitting a written appeal to the coordinator within five (5) working days from date this response was received. Ud. puede apelar esta respuesta al someter una apelación por escrito al coordinador dentro de cinco (5) días de trabajo de la fecha en que esta respuesta fue recibida.

Ex A2

AC USER/NUM. DE REGISTRO

18662700



APPEAL TO LEVEL III APELACIÓN AL 3ER NIVEL

Name: Nombre:	Last Apellido	First Nombre	Middle 2do Nombre	DOC Number Número DOC	Facility/Office Institución/Oficina	Unit/Cell Unidad/Celda
Mayer		Richard	A	846287	AHCC	C5-D-22
PART A - APPEAL TO LEVEL III PARTE A - APELACIÓN 3 ^{ER} NIVEL			Date Typed / Fecha escrita a mano 01/02/19		Due Date / Fecha de vencimiento 01/31/19	
<p>I WANT TO GRIEVE / QUIERO QUEJARME DE: Due to the outcome, and the seriousness of the complaint, I appeal to the next level.</p> <p>SUGGESTED REMEDY / REMEDIO SUGERIDO:</p>						
/s/ J. Martin		01/02/19		/s/ Richard Mayer		12/28/18
Grievance Coordinator Signature Firma del Coordinador de quejas		Date Fecha		Grievant Signature Firma del agraviado		Date Fecha

PART B - LEVEL III RESPONSE/PARTE B - RESPUESTA 3^{ER} NIVEL

I reviewed your initial grievance as well as all appeals and responses.

J. Lewis, Regional Safety Manager, also reviewed this grievance and provided this response:

I reviewed your Level I and II grievance, the investigation, and the responses. I have read your Level III appeal.

- The "trash grabber" tool that is identified in this report is used for the purpose of picking up small individual items of trash. It is not an appropriate tool for picking up large and heavy items such as bags of trash. It is, however, a safe and appropriate tool for picking up individual syringes and other similar items because the tool allows for the hazardous waste to be collected so that the worker has no direct contact with the hazard.
- Picking up a bag of trash is a task that must be done by hand. However, there are safe and unsafe ways of performing this task. The process of sliding your hand under the bag where you could not see or know what hazards might be present is not a safe way to perform this task. The safety orientation for workers includes instructions on how to safely pick up and handle large bags of trash.
- Personal Protective Equipment (PPE) gloves were being used when the incident occurred, however, a follow-up investigation revealed that the type of glove that was available was not adequate for the task. Heavier cut-resistant gloves are now available for use with this task.

Continued on Page 2

Page 1 of 2

Assistant Secretary/Deputy Director/designee
Subsecretario/designado

Date
Fecha



LOG I.D. NUMBER/NUM. DE REGISTRO

18662700

APPEAL TO LEVEL III
APELACIÓN AL 3ER NIVEL

Name: Nombre:	Last Apellido	First Nombre	Middle 2do Nombre	DOC Number Número DOC	Facility/Office Institución/Oficina	Unit/Cell Unidad/Celda
	Mayer	Richard	A	846287	AHCC	C5-D-22
PART A - APPEAL TO LEVEL III PARTE A - APELACIÓN 3ER NIVEL				Date Typed / Fecha escrita a mano 01/02/19	Due Date / Fecha de vencimiento 01/31/19	

PART B - LEVEL III RESPONSE/PARTE B - RESPUESTA 3ER NIVEL


Continued from Page 1

- As a result of the injury you sustained the safety orientation that is provided to workers emphasizes the importance of checking for any and all hazards prior to performing the work. This is important so that hazards are identified and reported ahead of performing each task and so the task can be carried out safely without risk to the worker. The orientation now includes the specific task of how to safely collect and lift trash bags.
- Finally, to help ensure that other facilities that utilize off-site work crews for the purpose of collecting trash, a reminder has been distributed to each prison on the importance of following proper procedures and using the correct personal protective equipment (PPE) when picking up hazardous waste.

Based on the above facts and findings, my conclusion is that this grievance has been fully heard and appropriately answered.

Thank you for identifying your concerns, and for your interest in improving safety for yourself and others.

Page 2 of 2



Assistant Secretary/Deputy Director/designee
Subsecretario/designado

Tomas P. Fithian

3/5/2019
Date
Fecha

EXHIBIT B

Class IV Work Crew Master Agreement
Between
THE WASHINGTON STATE DEPARTMENT OF CORRECTIONS
And
CITY OF AIRWAY HEIGHTS

This Master Contract Agreement is entered into by and between the State of Washington, Department of Corrections, hereinafter referred to as DOC, and, City of Airway Heights located at 1208 S. Lundstrom St. Airway Heights WA, 99001 hereinafter referred to as the 'RECIPIENT OF THE SERVICES' or 'RECIPIENT'. Legal authority for this Master Contract Agreement is pursuant to RCW 72.09.100 and Chapter 137-80 WAC.

Offenders who provide services under this Agreement reside in a DOC prison and are under the jurisdiction of the Washington State Department of Corrections.

1. PURPOSE

The purpose of this Agreement is to provide the master terms and conditions between the parties for offenders to provide work crew services to the RECIPIENT. To be eligible to receive offender services, the RECIPIENT must be an agency of Washington State government, a local government or federally recognized Indian tribe within Washington State or a public benefit nonprofit as defined by the IRS; a 501(c)(3) Charitable Organization or a 501(c)(4) Social Welfare Organization. No public employees will be displaced as a result of this Agreement.

On January 1, 2016, the terms and conditions contained in this Master Agreement will replace and terminate any previous Work Crew Agreement and Work Project Descriptions between the Parties. For this Master Agreement to be valid it must be signed by the DOC Contracts Administrator or designee on behalf of DOC.

2. WORK PROJECT DESCRIPTIONS

Offender work crew projects are limited to those that can be properly supervised as determined by the Superintendent of the Institution or designee and the RECIPIENT's Contract Manager. Each project is subject to careful review for custody and security requirements. Each distinct project requires a separate Work Project Description that is signed by both parties to this Agreement. [See Attachment A] The Work Project Description will detail the work to be done by offenders, the cost to the RECIPIENT and other specifics of the particular project.

The Institution Superintendent or designee is authorized to sign Work Project Descriptions on behalf of DOC. A Work Project Description may be valid for up to one year but must end prior to or on the same date as this Master Contract Agreement. All services provided under each signed Work Project Description shall be performed pursuant to the terms of this Master Agreement.

3. TERM

The term of this Master Agreement shall begin January 1, 2016 and continue through November 30, 2019, unless terminated sooner as provided for herein.

State of Washington
Department of Corrections

Page 1 of 8

K11139

4. BILLING and PAYMENT

In consideration of the services provided hereunder, payment to DOC will be as follows:

- A. DOC will invoice the RECIPIENT for payment by the 20th of the month following each month in which offender services were provided. Invoices for payment will include all direct and indirect charges payable to DOC by the RECIPIENT that were negotiated between the Parties, except that payment for offender L&I insurance coverage will be paid directly to L&I by the RECIPIENT and will not appear on DOC invoices.
- B. Payment by the RECIPIENT, will be due to the DOC address indicated below within 30 calendar days of the date of the invoice. This DOC Master Agreement number and the location of the project for which payment is made must be included with each payment.
- C. Workers compensation insurance is required by law for offenders who provide services to the RECIPIENT under the terms of this Agreement. RECIPIENT will:
 - 1) Prior to contract execution, contact its L&I Account Manager to request/authorize the addition of Offender L&I Risk Classification 4908 to the RECIPIENT's L&I Account.
 - 2) Provide DOC with a copy of the Rate Notice received from L&I that confirms the addition of Risk Classification 4908 to the RECIPIENT's L&I Account. DOC advises RECIPIENT to include the L&I Rate Notice when returning this partially executed Agreement to DOC for final signature by DOC.
 - 3) Each quarter, for offender services provided to the RECIPIENT during the previous quarter, report to L&I the total number of offender hours worked and pay the total cost due for workers' compensation coverage directly to L&I for those offender hours.
- D. Addresses to use for Billing and Payment.
 - 1) **Billing** - Invoices for payment will be mailed to the address provided by the RECIPIENT:

RECIPIENT: City of Airway Heights
Attn: Glenn Pike, Parks Maintenance Coordinator
Mailing Address: 1208 S. Lundstrom St.
City, State, Zip Code: Airway Heights, WA, 99001

- 2) **Payment**

- a. State Agencies Only - will pay using the following statewide vendor number: SWV0003872-01 [IAP Payment - DOC General Account]
- b. ALL Other RECIPIENTS - will send payment to the address provided by the DOC facility from which offender services were provided.

5. TERMINATION

When in its own best interest, either party may terminate this Agreement, in whole or in part, upon 30 days' written notice to the other party, beginning on the second day after mailing such notice. If

this Agreement is so terminated each of the parties shall be liable only in accordance with the terms of this Agreement for services rendered prior to the effective date of termination.

6. SELECTION OF OFFENDERS

The Institution will select the offenders for each work crew. Selection criteria will conform to DOC Policy 700.400, CLASS IV OFF-SITE WORK CREW, DIRECTIVE III, Offender Eligibility, as now written or hereafter revised.

7. HAZARD ASSESSMENT AND MITIGATION

- A. In accordance with the DOC Office of Risk Management, work generally considered to be dangerous or hazardous may not be performed by offenders.
- B. Before DOC offenders may provide services at any new and distinct project location, the RECIPIENT will assess the location for hazardous conditions and/or materials. (See Attachment B)
- C. The RECIPIENT's assessment must be performed in accordance with WAC 296-800-160 and provided to DOC using DOC Form 03-247 or other similar hazard assessment and PPE selection worksheet. The RECIPIENT will inform DOC promptly, in writing, if hazardous conditions or materials are found at the new project site.
- D. Once notified, DOC at its own discretion, may a) identify, with the RECIPIENT, the protective equipment or clothing that is needed for offenders and correctional officers to mitigate the effects of the on-site hazard(s); or b) request that the RECIPIENT remove or otherwise mitigate the hazard before offenders perform the contracted work crew services at that site; or c) withdraw from the project.
- E. If hazardous conditions or materials are discovered while offenders are working at RECIPIENT's site, then offender work will be suspended immediately and RECIPIENT will make appropriate regulatory notifications and request further assessment.

8. TOOLS, EQUIPMENT AND SUPPLIES

A. In General

- 1) DOC will provide offenders with basic work attire, such as boots, gloves, goggles and rain gear, that may be needed for any project;
- 2) If the Parties to this Agreement do not negotiate otherwise, the RECIPIENT will provide any additional tools, equipment and supplies that offenders need to accomplish the Recipient's specific work project. This will include any Personal Protective Equipment (PPE) e.g. bump hats, specialized goggles or gloves, hearing and eye protective devices, etc. and any specialized safety equipment (SSE) necessary to protect offenders and correctional officers from hazards at the project site.
- 3) The specific tools, equipment and supplies necessary for each project, and the party to the Agreement responsible for providing each item, will be designated in the Work Project Description for that project.

9. TRAINING

- A. The RECIPIENT will train offenders regarding the work to perform as well as any safety requirements specific to the project site and the use of any specialized equipment.
- B. The RECIPIENT will ensure that all safety training is in compliance with all applicable laws and regulations including, but not limited to, Division of Occupational Safety and Health (DOSH) regulations and the Washington Industrial Safety and Health Act (WISHA).

10. PRISON RAPE ELIMINATION ACT (PREA) and SEXUAL MISCONDUCT

PREA requirements shall apply to any person having contact with offenders under DOC jurisdiction. This includes, but is not limited to, governmental entities, contractors and their employees; Recipients of offender work crew services, vendors and their employees, student interns and volunteers, hereinafter referred to collectively as 'contractor'. Contractors may obtain electronic access to the documents cited below in Section 1, Authorities, from the DOC website.

A. Authorities

In the performance of services under this Contract, Contractors shall comply with all federal and state laws and DOC policies regarding sexual misconduct including, but not limited to:

Federal Law:

- Prison Rape Elimination Act of 2003 (PREA);

State Law, Washington:

- RCW 72.09.225, Sexual misconduct by state employees, contractors;
- RCW 9A.44.010, Definitions;
- RCW 9A.44.160 Custodial sexual misconduct in the first degree;
- RCW 9A.44.170, Custodial sexual misconduct in the second degree;

DOC Policy:

- DOC 490.800, Prison Rape Elimination Act (PREA) Prevention and Reporting;
- DOC 490.820, Prison Rape Elimination Act (PREA) Risk Assessments and Assignments;
- DOC 490.850, Prison Rape Elimination Act (PREA) Response;
- DOC 490.860, Prison Rape Elimination Act (PREA) Investigation; and
- DOC 610.025, Medical Management of Offenders in Cases of Alleged Sexual Abuse or Assault.

B. Contractor Requirements include, but are not limited to:

1. Zero tolerance toward all forms of sexual abuse and sexual harassment;
2. Familiarization and compliance with PREA law, relevant Washington State laws and DOC policies regarding PREA and sexual misconduct;
3. Ensuring that anyone who may have contact with DOC offenders complete DOC PREA/Sexual Misconduct training and comply with all PREA standards.

4. All personnel under this contract, with access to DOC offenders, must certify that they have not:
 - Engaged in sexual misconduct in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution as defined in 42 U.S.C. 1997;
 - Been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
 - Been civilly or administratively adjudicated to have engaged in the activity described above.
5. Providing sexual misconduct disclosure forms to DOC (DOC Form #03-502), completed by each person providing services, retaining a copy of the same in each individual personnel record.
6. Submitting to a criminal background check, performed by DOC, at least once every five years.
7. Compliance with the affirmative duty to report personnel with any conviction or adjudication of a violation of any of the offenses listed in #4, above.
- C. Investigations. DOC will investigate any allegation of the contractor's failure to comply with DOC PREA policies or the PREA standards.
- D. Consequences of a Contractor's failure to conform with DOC PREA policies include, but are not limited to:
 1. Contractor removal from proximity to offenders;
 2. Contractor removal from contract work at DOC;
 3. Contract termination.

11. CONTRACT MANAGEMENT

The contract manager(s) for each of the Parties shall be responsible for and shall be the contact person(s) for all communications regarding the performance of this Agreement. Either party may, with written notice to the other, designate different contact persons.

RECIPIENT: Glenn Pike, Parks Maintenance Coordinator, (509) 244-4001, gpik@cawh.org

DOC: Michael Kleinke, Correctional Program Manager, (509) 244-6817, michael.kleinke@doc.wa.gov

12. SUPERVISION

- A. The Work: RECIPIENT will supervise the work performed by offenders and maintain daily oversight of the project until completed. RECIPIENT will provide adequate worksite instruction and direction to all offenders, to ensure safe work performance and proper project outcome.

- B. Security and Custody: A first aid qualified Correctional Officer will supervise offenders at all times. Such DOC supervision shall only be for the security and custody of the offenders and the safety of the public at large.

Correctional Officers may not supervise the work performed by offenders or be responsible for project outcomes.

- C. On-Site Illness/Accidents: In the event of offender illness or injury, DOC will provide the appropriate first aid. If necessary, emergency medical assistance will be called, or the offender will be transported to the nearest medical facility for treatment.

1) Expenses:

- a) Illness. DOC will pay all expenses related to treatment of offender illness.
- b) Injury. The cost of treatment provided to offenders beyond first aid for any and all work related injuries will be paid in accordance with Title 51 RCW.
- c) The RECIPIENT's L&I account number, 211.198-00, will be the account number used by offenders, DOC and medical providers when reporting offender work related injury.

13. PUBLIC INFORMATION

Neither party shall arrange for news media coverage without the consent of the other party, nor shall either party release information to the news media without the consent of the other party.

14. WORK PRODUCT and PERFORMANCE

- A. Washington State and DOC, including its agents and/or employees:
- 1) Are not responsible for, and do not guarantee, the quality of the work performed or products produced by offenders on work crews;
 - 2) Shall not be required to pay other workers to re-do or repair the work performed by the offenders; and
 - 3) Are not responsible for damages to third parties resulting from the work performed or products produced by offenders on work crews.

15. INDEMNIFICATION

- A. RECIPIENT, its agents, and/or employees:
- 1) Are responsible for any damages resulting from the negligence of the RECIPIENT, its agents, and/or employees; and
 - 2) Do indemnify, defend, and hold harmless DOC for claims arising from the negligent acts or omissions of the RECIPIENT, its agents, and/or employees.
- B. DOC, its agents, and/or employees:
- 1) Are responsible for damages that arise out of DOC, its agents, and/or employees' negligent security supervision of offenders.

- C. In accordance with the laws of the state of Washington and to the extent permitted by law, if both parties to this Agreement are negligent and jointly liable, each party will assume responsibility for its own negligent acts or omissions.

16. TRANSPORTATION

The DOC Facility has sole responsibility to transport offenders to and from the work project site.

17. DISPUTES

- Should the parties hereto be unable to informally resolve any dispute concerning the terms of this Agreement, the dispute will be settled in binding arbitration by an arbitrator chosen by consent of both parties.

18. INSURANCE

RECIPIENT will provide DOC with proof of current general liability insurance coverage when signing and returning this Agreement for final signature by DOC. RECIPIENT must maintain its policy of general liability insurance throughout the term of this Agreement and provide renewed proof of such coverage to DOC annually with each new Work Project Description.

RECIPIENT'S liability insurance coverage must have a limit of not less than \$1,000,000 per each occurrence with an aggregate limit of at least \$2,000,000.

19. PUBLIC BENEFIT NON-PROFIT

In order to utilize offender work crew services, RECIPIENTS that are non-profits, must be public benefit non-profits, as defined by the federal Internal Revenue Service (IRS). Those that are public benefit non-profits must provide proof to DOC of official IRS designation as a (501(c)(3) Charitable Organization or a (501(c)(4) Social Welfare Organization.

The RECIPIENT must provide DOC with proof of its IRS public benefit non-profit designation, with this partially signed Agreement when returning this partially signed Agreement to DOC Contracts and Legal Affairs for the final signature by DOC.

20. CHANGES AND MODIFICATIONS

Changes or modifications to this Agreement shall not be binding unless agreed to in writing by the parties hereto prior to such change or modification. Only the DOC Secretary or designee has the authority to alter, amend, modify, or waive any clause or condition of this Agreement for DOC.

21. WAIVER

Waiver of any breach or default on any occasion shall not be deemed to be a waiver of any subsequent breach or default. Any waiver shall not be construed to be a modification of the terms and conditions of this Agreement.

22. SEVERABILITY

If any term or condition of this Agreement is held invalid by any court, such invalidity shall not affect the validity of the other terms and conditions of this Agreement.

23. INTEGRATION

This Agreement contains all the terms and conditions agreed upon by the parties. No understandings or otherwise regarding the subject matter of this Agreement shall be deemed to exist or to bind either of the parties hereto. As used herein, reference to the Agreement shall include this Master Agreement, fully executed amendments to this Agreement, and any Work Project Descriptions executed and attached hereto.

THIS Agreement, consisting of eight (8) pages and one (1) attachment, is executed by the persons signing below who warrant that they have the authority to execute the Agreement.

CITY OF AIRWAY HEIGHTS

Albert Tripp
(Signature)
Albert Tripp
(Printed Name)
City Manager
(Title)
2-17-16
(Date)

DEPARTMENT OF CORRECTIONS

[Signature]
(Signature)
Gary Banning
(Printed Name)
Contracts Administrator
(Title)
2/19/16
(Date)

Approval on file.
This contract format was approved
by the Office of the Attorney General.

Approved as to Form:

By Tim Lang, Sr. Assistant Attorney General
December 8, 2015

EXHIBIT C

Ex C1

DATE (m/d/yy)	TIME (24-hr)	FACILITY	UNIT	ALLERGIES
12/26/18	1130	Artes	MSU	
<input type="checkbox"/> Risks/benefits of recommended intervention explained; patient consents				
Kites feeling ill				
PLAN / RX (Dx required for medication orders) <ul style="list-style-type: none"> ① Lab 7-10d <ul style="list-style-type: none"> - CBC - PT/INR - CMP - AIC - TSH & ref - UA complete with micro - LFTS ② Appt - Sandra P labs Complete ③ Please ✓ ortho Static B/p pulse within 2 days 				

846287 3/22/1984
Mayer Richard

12/26/18 1500
Joyce Nuxoll RN2

12/27/18
Sandra P

DATE (m/d/yy)	TIME (24-hr)	FACILITY	UNIT	ALLERGIES
12/27/18	0835	Artes	MSU	PKA
<input type="checkbox"/> Risks/benefits of recommended intervention explained; patient consents				
I was diagnosed with Hep C after dirty needle poke on Nov 13. Around Nov 27 th he noticed he was nauseous, had super bad urine, lack of appetite, not on any meds. In Aug he weighed 194 ^{lb} . Now weighs 174 ^{lb} . Has not tried to lose wt. No vomiting or diarrhea. VS wt 174 - Temp 98.4 - O2 sat 99% BP 135/75 - P 60 BP 135/87 - P 64 BP 143/94 - P 73 Lungs clear. Heart rate reg. Hyperactive BT's. Abd flat, soft & non-tender. NO edema. Does not feel dizzy. Will talk to S Thompson for orders. J Nuxoll RN2				

HAYER, RICHARD
846287 03/22/1984

State law (RCW 70.02) and/or federal regulations (42 CFR Part 2) prohibit disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law.



DOC 410.430 DOC 420.250 DOC 420.312 DOC 490.850
 DOC 610.010 DOC 610.025 DOC 610.040 DOC 610.600
 DOC 610.650 DOC 630.520 DOC 670.020

PRIMARY ENCOUNTER REPORT

DOC 13-435 (11/20/2014)



EX C2

Copy

LOG I.D. NUMBER

OFFENDER COMPLAINT

CHECK ONE: ☒ Initial ☐ Emergency ☐ Appeal ☐ Rewrite

RESIDENTIAL FACILITIES: Send completed form to the Grievance Coordinator. Explain what happened, when, where, and who was involved or which policy/procedure is being grieved. Be as brief as possible, but include the necessary facts. Use only one complaint form. A formal grievance begins on the date the typed grievance forms are signed by the Coordinator. Contact a Department employee to report an emergency situation or to initiate an emergency complaint. Please attempt to resolve all complaints through the appropriate Department employee(s) before pursuing a grievance.

NOTE: Complaints must be filed within 20 working days of the incident. Appeals must be filed within 5 working days of receiving the response. Include log ID # on rewrite or response being appealed.

Last Name	First	Middle	DOC Number	Facility/Office	Unit/Cell
Mayer	Richard	Alexander	846284	MSU	2-C5-D-2
COMMUNITY SUPERVISION: Send completed copies of this form directly to: Grievance Program Manager, Offender Grievance Program, Department of Corrections, P.O. Box 41129, Olympia WA 98504-1129.					
MAILING ADDRESS: STREET OR P.O. BOX		CITY, STATE		ZIP CODE	TELEPHONE
<p>COMPLAINT: ON August 24 I was stuck by a Hypodermic Needles I was put on a 30 DAY supply of TRIVADA & Raltegravir for HIV preventative medication. I went thru 30 DAYS of being sick with sore bones & muscles aches and upset stomach due to the side effects. ON Oct 3 I was called INTO medical by MRS. ZINA Blanchard. She says to me, "I don't have to tell you this but I think you should know, you were given the wrong dose of medication." I should of only been on the pills for 15 days not 30 days one pill a day. Mrs. Blanchard said due to the mix up on the dosage that the preventative medication will now not be effective & that there is a really low chance of contracted HIV because I was given the wrong dose of medication.</p> <p>SUGGESTED REMEDY: given the wrong dose of medication.</p> <p>All medical staff be on the same page.</p> <p>Mandatory <u>Mayer</u> 10-18-19</p>					
GRIEVANCE COORDINATOR'S RESPONSE Your complaint is being returned because: <input type="checkbox"/> It is not a grievable issue. <input type="checkbox"/> You requested to withdraw the complaint. <input type="checkbox"/> You failed to respond to callout (sheet) on _____ <input type="checkbox"/> Administratively Withdrawn _____ <input type="checkbox"/> The formal grievance/appeal paperwork is being prepared. <input type="checkbox"/> Not accepted			Facility/Office	Date Received	
			<input type="checkbox"/> The complaint was resolved informally. <input type="checkbox"/> Additional information and/or rewriting needed. (See below.) Return within 5 working days or by: _____ <input type="checkbox"/> No rewrite received _____ <input type="checkbox"/> Sent to _____ (facility) on _____ (date).		
EXPLANATION:					
Coordinator's Name (print)			Coordinator's Signature		Date



Ex C3
COPY

LOG I.D. NUMBER

OFFENDER COMPLAINT

CHECK ONE: ☒ Initial ☐ Emergency ☐ Appeal ☐ Rewrite

RESIDENTIAL FACILITIES: Send completed form to the Grievance Coordinator. Explain what happened, when, where, and who was involved or which policy/procedure is being grieved. Be as brief as possible, but include the necessary facts. Use only one complaint form. A formal grievance begins on the date the typed grievance forms are signed by the Coordinator. Contact a Department employee to report an emergency situation or to initiate an emergency complaint. Please attempt to resolve all complaints through the appropriate Department employee(s) before pursuing a grievance.

NOTE: Complaints must be filed within 20 working days of the incident. Appeals must be filed within 5 working days of receiving the response. Include log ID # on rewrite or response being appealed.

Last Name	First	Middle	DOC Number	Facility/Office	Unit/Cell
Mayer	Richard	Alexander	846284	MSU	B-5-D-2

COMMUNITY SUPERVISION: Send completed copies of this form directly to Grievance Program Manager, Offender Grievance Program, Department of Corrections, P.O. Box 41129, Olympia, WA 98504-3129.

MAILING ADDRESS: STREET OR P.O. BOX	CITY, STATE	ZIP CODE	TELEPHONE
-------------------------------------	-------------	----------	-----------

COMPLAINT: ON August 24 I WAS Stuck By A Hypodermic Needles I WAS put on A 30 DAY supply of TRIVADA Raltegravir 100mg KIV preulative medication. I went thru 30 DAYS of Being Sick with Side Bones & muscles Aches and upset stomach Due to the side effects. ON Oct 3 I WAS called INTO medical by MRS. ZINA Blancher. She says to me "I Don't HAVE to TELL you this. But I TH you should know, you were given the wrong Dose of medication. I should of only Been on the Pills for 15 Days. ALL A DAY. Not 30 DAYS one Pill A Day. MRS. Blancher Med Due TO the mix up on the Dosage that the previous medication will now not Be effective. THAT there is A Really low chance of contracted HIV Because I was SUGGESTED REMEDY: given the wrong DOSE of medication."

All medical staff
Be on the same page

Mandatory

Signature

Date

GRIEVANCE COORDINATOR'S RESPONSE

Your complaint is being returned because:

- ☐ It is not a grievable issue.
- ☐ You requested to withdraw the complaint.
- ☐ You failed to respond to callout (sheet) on _____
- ☐ Administratively Withdrawn _____
- ☐ The formal grievance/appeal paperwork is being prepared.
- ☐ Not accepted

Facility/Office

Date Received

- ☐ The complaint was resolved informally.
- ☐ Additional information and/or rewriting needed. (See below.)
Return within 5 working days or by: _____
- ☐ No rewrite received _____
- ☐ Sent to _____ (facility) on _____ (date).

EXPLANATION:

Coordinator's Name (print)

Coordinator's Signature

Date



Ex C4

DOC I.D. NUMBER

18666464

APPEAL TO LEVEL II
APELACIÓN AL 2DO NIVEL

Name: NOMBRE:	Last APELLIDO	First PRIMERO NOMBRE	Middle 2DO NOMBRE	DOC Number NUMERO DOC	Facility/FACILIDAD Office	Unit/Cell UNIDAD/CELDA
	Mayer	Richard	A	846287	AHCC	C-5/D-022
PART A - INITIAL GRIEVANCE/PARTE A - QUEJA INICIAL				Date Typed 2/11/19	Date Due 3/12/19	

I WANT TO APPEAL: I was stuck by a dirty hypodermic needle, its nice to hear my level of risk is considered negligible, meaning so small or unimportant to be safely disregarded. Whether I had a 1% chance or a 99% chance the fact is I was exposed to a infectious disease and should have been treated with the right dose of medication.

SUGGESTED REMEDY:

/s/ J. Martin

2/11/19

/s/ Richard Mayer

2/11/19

Grievance Coordinator Signature
FIRMA DE COORDINADOR DE QUEJAS

Date
FECHA

Grievant Signature
FIRMA DE QUEJANTE

Date
FECHA

PART B - LEVEL II RESPONSE/PARTE B RESPUESTA 2DO NIVEL

Your Level 2 appeal was investigated by HSM McIntyre and you were interviewed to gather the facts surrounding this complaint. A review of your records and a consultation with staff revealed that you were prescribed Raltegravir on a once per day basis, although the preferred frequency was twice per day. A nurse involved in the ordering process has acknowledged prompting the once per day frequency, and her supervisor has requested a revision and update of a document, which may have contributed to the misunderstanding. It is understood that you experienced side effects from the prescribed medication and ask you to consider that if you had received it twice per day, which would have meant twice as much, your side effects may have worsened. At any rate I am glad to learn that you turned out to be negative for the disease for which the medication was prescribed.

It is my understanding that some of the wording in the Level 1 grievance response offended you. In addition to Mr. McIntyre's reported apology, I too want you to know that it was not anyone's intent to minimize the significance of your situation by using the term "negligible" to describe the risk of HIV disease transmission. Something like "at very low risk from a needle stick" is what was intended to be conveyed. I also understand that you did test positive for another contagious illness, and that a plan is in process for you to receive the curative treatment following your pending release. I wish you a full recovery and a successful re-entry into the community. I also want to thank you for bringing your concern to our attention—your suggested remedies (getting medical staff "on the same page" and getting yourself treatment) appear to be under way.


Superintendent, Work Release Supervisor, Field Administrator Signature
SUPERINTENDENTE

3.7.19
Date
FECHA

You may appeal this response by submitting a written appeal to the coordinator within five (5) working days from date this response was received. Ud. puede apelar esta respuesta al someter una apelación por escrito al coordinador dentro de cinco (5) días de trabajo de la fecha en que esta respuesta fue recibida.

Ex C5

MAYER, RICHARD
03/22/1994
046287

DATE (m/d/yyyy)	TIME (24-hr)	FACILITY	ATTN
8/24/18	1705	(continued)	NKDA
<input type="checkbox"/> Risks/benefits of recommended intervention explained; patient consents			
<p>(see previous per)</p> <p>Pt seen by nursing staff at msu prior to arrival area to main medical. Pt stated to LPN that he washed his hands immediately and nursing staff cleaned @ index finger once he arrived to medical. (bleeding noted) discoloration noted to site at this time. Will follow up w/ Pt when results arrive. Pt states he understands everything discussed and will follow medication regimen till complete.</p> <p>Above of previous reviewed. I agree & have nothing to add.</p> <p><i>[Signature]</i> E. HERBST, LPN #IPN</p>			
<p>PLAN / RX (Dx required for medication orders. Allergies required for new medication orders)</p> <p>4) Emtricitabine/tenofovir DF Fum 200-300 mg Tab take 1 tablet by mouth every day x 28 days (PEP)</p> <p>5) Raltegravir 400mg/tab take 1 tablet by mouth every day x 28 days (PEP)</p> <p><i>[Signature]</i> S. Thompson, ARNP</p>			

MAYER, RICHARD
03/22/1994
046287

DATE (m/d/yyyy)	TIME (24-hr)	FACILITY	ATTN
8/24/18	1230	AHER	msu
<p>Late Entry</p>			
<input type="checkbox"/> Risks/benefits of recommended intervention explained; patient consents			
<p>Pt brought to msu clinic from off site work crew. Has dirty needlestick from picking up litter along road side. The CO brought a dirty TB syringe & needle in empty water bottle. States it was the needle he got stuck with. Gave pt surgical scrub soap so he could clean finger at sink. He washed finger. No bleeding at site. Talked to Eileen Herbst LPN IPN & he was sent to main to be seen by S Thompson, Lab & Eileen Herbst.</p> <p><i>[Signature]</i> Joyce Nixall, RN2</p>			
<p>PLAN / RX (Dx required for medication orders. Allergies required for new medication orders)</p>			

State law (RCW 70.02) and/or federal regulations (42 CFR Part 2) prohibit disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law.



DOC 320.255 DOC 410.430 DOC 420.250 DOC 420.255
DOC 420.312 DOC 480.850 DOC 610.010 DOC 610.025
DOC 610.040 DOC 610.600 DOC 610.650 DOC 670.020

PRIMARY ENCOUNTER REPORT

DOC 13-435 (01/06/2017)

03/22/1984

[illegible]

DATE (m/d/y)	TIME (24-hr)	FACILITY
8/24/18	1305	AMCC NKDA
<input type="checkbox"/> Risks/benefits of recommended intervention explained; patient consents		
Patient received needle stick to (1) fingertip area of index finger while out to work crew cleaning up roadside picking trash up and was stuck by a needle of source person. Discussed to patient risk of exposure low, education provided patient verbalizes understanding, Pt aware of testing ordered and consents.		
Anti HBs (+) HBs Ag (+) Anti HBe (+) Anti HBe (+) Anti HCV (+) HIV (+)		
Medications (PEP) discussed Pt aware of risks & benefits of meds at this time. Provides also ordered Augmentin. (see next page)		
PLAN / RX (Dx required for medication orders. Allergies required for new medication orders)		
CBC, CMP HIV, Anti HCV today, 11/2018, 2/2019 Teleph IMV Start today PEP Truvada take 1 tablet daily x 3 days by mouth Start 8/24/18 End 8/27/18 3) Dolutegravir 50mg/tab take 1 tablet by mouth daily x 3 days Kor Start 8/24/18 End 8/27/18 3) Augmentin 875-125mg Tab (tablet by mouth every 12 hours until gone Kor 8/24/18		

State law (RCW 70.02) and/or federal regulations (42 CFR Part 2) prohibit disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law.



DOC 320.255	DOC 410.430	DOC 420.250	DOC 420.255
DOC 420.312	DOC 490.850	DOC 610.010	DOC 610.025
DOC 610.040	DOC 610.600	DOC 610.650	DOC 670.020

PRIMARY ENCOUNTER REPORT

DQC 13-435 (01/06/2017)

EXHIBIT D



LOG I.D. NUMBER
18662700

OFFENDER COMPLAINT

CHECK ONE: ☐ Initial ☐ Emergency ☒ Appeal ☐ Rewrite

RESIDENTIAL FACILITIES: Send completed form to the Grievance Coordinator. Explain what happened, when, where, and who was involved or which policy/procedure is being grieved. Be as brief as possible, but include the necessary facts. Use only one complaint form. A formal grievance begins on the date the typed grievance forms are signed by the Coordinator. Contact a Department employee to report an emergency situation or to initiate an emergency complaint. Please attempt to resolve all complaints through the appropriate Department employee(s) before pursuing a grievance.

NOTE: Complaints must be filed within 20 working days of the incident. Appeals must be filed within 5 working days of receiving the response. Include log ID # on rewrite or response being appealed.

Last Name	First	Middle	DOC Number	Facility/Office	Unit/Cell
Mayer	Richard	Alexander	846284	ATCC	C5-D-2-2
COMMUNITY SUPERVISION: Send completed copies of this form directly to: Grievance Program Manager, Offender Grievance Program, Department of Corrections, P.O. Box 41129, Olympia WA 98504-1129.					
MAILING ADDRESS - STREET OR P.O. BOX			CITY, STATE	ZIP CODE	TELEPHONE

COMPLAINT: Sgt. BAKER Conducted An Investigation Surrounding the fact that I was stuck by a Hypodermic Needle while working on a Security Crew. At the interview I explained I was directed to pick up an area littered with trash and amongst the trash there were hypodermic needles visible. Not only did I see the hypodermic needles the escorting officer, two other inmates and the lady working for Airway Heights Parks & Rec seen the hypodermic needles as well. The escorting officer advised us to be careful due to the fact that there are visible hypodermic needles mixed in with the trash. Airway Heights Parks & Rec did not supply me with cut proof gloves and or hand held shavers. I was expected to pick up hazardous materials due to the fact the escorting officer was aware of the hypodermic needles that were visible and scattered about. Sgt Baker put in his report "A large trash bag was observed and it was decided that bag would be removed." it was not just a large trash bag the area looked like a homeless camp. Due to this incident I suggested remedy: I tested positive on November 13 for Hepatitis C. with Sgt Baker being Sgt. for the Security crew I believe there is a conflict of interest & I didn't receive a fair investigation.

Mandatory

Signature

Date

11/28/18

GRIEVANCE COORDINATOR'S RESPONSE

Your complaint is being returned because:

- ☐ It is not a grievable issue.
☐ You requested to withdraw the complaint.
☐ You failed to respond to callout (sheet) on _____.
☐ Administratively Withdrawn _____.
☐ The formal grievance/appeal paperwork is being prepared.
☐ Not accepted

Facility/Office

Date Received

ATCC Maw

12-6-18

- ☐ The complaint was resolved informally.
☒ Additional information and/or rewriting needed. (See below.)

Return within 5 working days or by: 12-20-18

- ☐ No rewrite received _____
☐ Sent to _____ (facility) on _____ (date).

EXPLANATION:

This appeal includes new information and you also submitted 2 new initial complaints that would be part of the appeal to 18662700. Please write 1 simple straight forward complaint/appeal for 18662700.

Coordinator's Name (print)

M. Jackson

Coordinator's Signature

[Signature]

Date

12-12-18



(800) 700-6891
 BEND (541) 385-1837
 BOISE (208) 375-2350
 PENDLETON (541) 276-4730
 SEATTLE (206) 623-3614

Patient Name: MAYER, RICHARD
 DOB: Mar 22, 1984 34y M
 Dr: SANDRA THOMPSON
 Mail stop: I-WEB

Accession: 8-65833
 Request: AA1252
 ID: 846287
 SSN:

Client: AIRWAY HEIGHTS CORRECTIONS-MSU
 Collected: Aug 24, 2018 13:33 PST
 Accessioned: Aug 25, 2018 00:13 PST
 Completed: Aug 27, 2018 06:20 PST
 Hrs Fast: N/G

THIS IS A COMPLETED REPORT

COMPREHENSIVE METABOLIC PANEL

TEST	VALUE	REF. RANGE	UNITS	LC	TEST	VALUE	REF. RANGE	UNITS	LC
SODIUM	140	132-143	meq/L	AA	CARBON DIOXIDE	27	19-31	meq/L	AA
POTASSIUM	4.2	3.5-5.1	meq/L	AA	ANION GAP	16.2	7-21		AA
CHLORIDE	101	95-112	meq/L	AA					
GLUCOSE	110 H	70-100	mg/dL	AA	GFR ESTIMATION	71		ml/min	AA
UREA NITROGEN	18	6-23	mg/dL	AA	BUN/CREAT. RATIO	15.4	6.0-28.6		AA
CREATININE, SERUM	1.17	0.60-1.35	mg/dL	AA	CALCIUM	9.7	8.5-10.3	mg/dL	AA
AST(SGOT)	36	13-39	U/L	AA	PROTEIN	7.5	6.0-8.3	g/dL	AA
ALT(SGPT)	32	7-52	U/L	AA	ALBUMIN	4.6	3.5-5.0	g/dL	AA
ALKALINE PHOS	92	31-120	U/L	AA	GLOBULIN	2.8	1.8-3.5	g/dL	AA
BILIRUBIN, TOTAL	0.7	0.0-1.2	mg/dL	AA	A/G RATIO	1.7	1.1-2.4		AA

ESTIMATED GFR Reference Range:

GFR = Less than 60: Chronic Kidney Disease, if found over a 3 month period.

GFR = Less than 15: Kidney Failure.

For African Americans, multiply the calculated GFR by 1.21.

GFR calculation is not valid for patients under age 18 years.

For patients over age 70 please interpret results with caution as results have not been validated for this calculation method

Please Note: Total Protein Reference range change as of 5/21/2018.

Please Note: Calcium reference range change as of 7/19/2018.

ANTI-HCV

TEST	VALUE	REF. RANGE	UNITS	LC	TEST	VALUE	REF. RANGE	UNITS	LC
ANTI-HCV	NEGATIVE	negative		AA					

ANTI-HCV INTERPRETIVE NOTES:

NEGATIVE: NO SEROLOGIC EVIDENCE OF CURRENT OR PAST HEPATITIS C VIRUS INFECTION.

POSITIVE: IF ANTI-HCV POSITIVE IS A TRUE POSITIVE, THIS IS CONSISTENT WITH CURRENT OR PAST HEPATITIS C VIRUS INFECTION. AT LEAST 70% OF THESE PATIENTS ARE OR WILL BECOME CHRONIC CARRIERS OF HEPATITIS C, WITH RISK OF CHRONIC ACTIVE HEPATITIS, CIRRHOSIS, AND/OR HEPATOMA. ANTI-HCV IS NOT PROTECTIVE. PATIENTS POSITIVE FOR ANTI-HCV SHOULD BE CONSIDERED INFECTIVE FOR HEPATITIS C. TEST FOR HCV RNA TO IDENTIFY CURRENT INFECTION.

Biotin in specimens taken from patients on high-dose biotin therapy or supplements may interfere with this test and cause inaccurate test results. It is recommended that for patients receiving therapy with high biotin doses (> 5 mg/day), no laboratory test specimen should be collected until at least 8 hours after the last biotin administration.

HIV 1+2 AbI/Ag

TEST	VALUE	REF. RANGE	UNITS	LC	TEST	VALUE	REF. RANGE	UNITS	LC
HIV 1+2 AbI/Ag	NON-REACTIVE	non-reactive		AA					

CBC w/ANC

TEST	VALUE	REF. RANGE	UNITS	LC	TEST	VALUE	REF. RANGE	UNITS	LC
WBC	5.9	4.5-11.0	K/uL	AA	MCV	89.1	81-99	fL	AA
RBC	5.32	4.3-5.7	M/uL	AA	RDW	13.0	10.5-15.0	%	AA
HEMOGLOBIN	16.1	13.5-18.0	g/dL	AA	MCH	30	27-33	pg	AA
HEMATOCRIT	47.4	41-50	%	AA	MCHC	34	30-36	g/dL	AA
PLATELET COUNT	176	140-440	K/uL	AA					
NEUTROPHILS	60.7	39-80	%	AA	EOSINOPHILS	0.7	0-6	%	AA
BANDS	0	0-7	%	AA	BASOPHILS	1.0	0-2	%	AA
LYMPHOCYTES	26.5	24-44	%	AA	OTHER	0	0	%	AA
MONOCYTES	11.1	0-12	%	AA					
NEUT, ABSOLUTE	3.58	2.0-6.9	K/uL	AA	EOS, ABSOLUTE	0.04	0.0-0.7	K/uL	AA
BAND, ABSOLUTE	0.00	0.0-0.6	K/uL	AA	BASO, ABSOLUTE	0.06	0.0-0.2	K/uL	AA
LYMPH, ABSOLUTE	1.56	0.6-3.4	K/uL	AA	OTHER, ABSOLUTE	0.00	0.0		AA
MONO, ABSOLUTE	0.65	0.0-1.1	K/uL	AA					

LABORATORY TESTING WORK CENTER CODES

AA
 IP PENDLETON 1
 2460 SW Perkins Ave
 PO BOX 1208

Sh
 S. Thompson, ARNP
 9/18/18

EXHIBIT E



18662700

CHECK ONE: ☒ Initial ☐ Emergency ☐ Appeal ☐ Rewrite

NOTE: Complaints must be filed within 20 working days of the incident. Appeals must be filed within 5 working days of receiving the response. Include log ID # on rewrite or response being appealed.

COMPLAINT: On 8-24-18 while working along the road picking up
trash on CREW myself along with two other inmates
we were instructed to be "very careful" by C/O BELLBURN
By a very dirty hypodermic needle I immediately reported the
incident to C/O BELLBURN who put the needle in a water bottle
and rushed into AHCO for medical. After talking with the nurse
I began to realize how serious the situation is. I broke down
and got emotional, the nurse asked me if I am okay & I gave
I was brought to AHCO where I was given a tetanus shot. Answer:
I was given a tetanus shot. I was also given a blood test. I was
given the risk of getting HIV. I was told for the next 28 days
I might have contracted something. But will not know until 6 months
I was given a blood test. I was also given a blood test. I was
given the risk of getting HIV. I was told for the next 28 days
I might have contracted something. But will not know until 6 months

SUGGESTED REMEDY: Proper training with hazardous material. Proper
gloves. As soon as hazardous material (hypodermic) are found the crew
should be pulled from job and a certified person should be called to
with hazardous material training with mandatory
proper gloves should be called to

Signature: Richard May 12 Date: 8-26-18

GRIEVANCE COORDINATOR'S RESPONSE Your complaint is being returned because:		Facility/Office PHCC MSU	Date Received 8-27-18
<input type="checkbox"/> It is not a grievable issue. <input type="checkbox"/> You requested to withdraw the complaint. <input type="checkbox"/> You failed to respond to callout (sheet) on _____ <input type="checkbox"/> Administratively Withdrawn _____ <input type="checkbox"/> The formal grievance/appeal paperwork is being prepared. <input type="checkbox"/> Not accepted		<input checked="" type="checkbox"/> The complaint was resolved informally. <input type="checkbox"/> Additional information and/or rewriting needed. (See below.) Return within 5 working days or by: _____ <input type="checkbox"/> No rewrite received _____ <input type="checkbox"/> Sent to _____ (facility) on _____ (date).	

EXPLANATION:		
Per our conversation this issue has been resolved		
Coordinator's Name (print)	Coordinator's Signature	Date
M. J. Kead	[Signature]	8-31-

STATE OF WASHINGTON)

SS

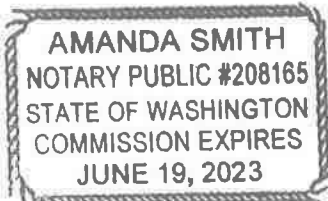
County of Spokane)


RICHARD MAYER, being first duly sworn on oath, deposes and states:

I am the named Plaintiff herein; I have read the foregoing Complaint for Damages, I know the contents thereof, and I believe the same to be true and correct.


RICHARD MAYER

SUBSCRIBED AND SWORN TO before me this 28 day of April, 2021.


AMANDA SMITH
NOTARY PUBLIC #208165
STATE OF WASHINGTON
COMMISSION EXPIRES
JUNE 19, 2023


NOTARY PUBLIC for the State of Washington
Residing at Spokane, WA
My Commission expires: 6/19/23

AMENDED COMPLAINT FOR DAMAGES
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PHELPS AND ASSOCIATES, PS

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